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To: Cllr Sam Swash (Chair)

Councillors: Carol Ellis, Hilary McGuill, Mel Buckley, Tina Claydon, Gladys Healey, Andy Hughes, Fran Lister Dave Mackie, Roz Mansell, Billy Mullin and Debbie Owen.

31 May 2024

Dear Sir/Madam

NOTICE OF HYBRID MEETING
SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE
THURSDAY, 6TH JUNE, 2024 at **2.00 PM**

Yours faithfully

Steven Goodrum
Democratic Services Manager

Please note: Attendance at this meeting is either in person in the Delyn Committee Room, Flintshire County Council, County Hall, Mold, Flintshire or on a virtual basis.

The meeting will be live streamed onto the Council's website. The live streaming will stop when any confidential items are considered. A recording of the meeting will also be available, shortly after the meeting at https://flintshire.public-i.tv/core/portal/home

If you have any queries regarding this, please contact a member of the Democratic Services Team on 01352 702345.

A G E N D A

1 **APPOINTMENT OF CHAIR**

Purpose: At the Annual Meeting, Council determined that the Flintshire People's Voice Group will chair this Committee. The Committee is advised that Councillor Sam Swash is the Chair of the Committee for the municipal year.

2 **APPOINTMENT OF VICE-CHAIR**

Purpose: To appoint a Vice-Chair for the Committee.

3 **APOLOGIES**

Purpose: To receive any apologies.

4 **DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)**

Purpose: To receive any Declarations and advise Members accordingly.

5 **MINUTES** (Pages 5 - 10)

Purpose: To confirm as a correct record the minutes of the meetings held on 18 January and 9 February 2024.

6 **FORWARD WORK PROGRAMME AND ACTION TRACKING** (Pages 11 - 20)

Report Overview & Scrutiny Facilitator

Purpose: To consider the Forward Work Programme of the Social & Health Care Overv Scrutiny Committee.

7 **SAFEGUARDING ADULTS AND CHILDREN'S ANNUAL REPORT** (Pages 21 - 36)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To provide members with information in relation to the Joint Adults and Children's Safeguarding provision within the county boundaries.

8 **AGE FRIENDLY COMMUNITIES** (Pages 37 - 126)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To update on progress to meet the recommendations of Audit Wales report "Equality Impact Assessments: more than a tick box exercise" and recommend improvements to ensure Integrated Impact Assessments are undertaken more consistently across the Council.

9 **DEFERRED CHARGES AUDIT REPORT** (Pages 127 - 172)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To present to the Committee an update on the progress following the Deferred Payment Audit Report.

10 **DRAFT SOCIAL SERVICES DIRECTOR'S ANNUAL REPORT 2023/24** (Pages 173 - 244)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: For Members to view the draft Annual Social Services Report and feedback on the draft content considered for inclusion, which include the key developments of the past year and our priorities for next year.

11 **SOCIAL SERVICES CARE INSPECTORATE WALES, PERFORMANCE EVALUATION INSPECTION NOVEMBER 2023 - ACTION PLAN UPDATE** (Pages 245 - 288)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To update on the outcome of the Social Services Care Inspectorate Wales Performance Evaluation Inspection in November 2023 including the resulting action plan based on the report's recommendations.

Please note that there may be a 10 minute adjournment of this meeting if it lasts longer than two hours

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SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE
18 JANUARY 2024

Minutes of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held as a hybrid meeting on Thursday, 18 January, 2024

PRESENT: Councillor Arnold Woolley (Chair)
Councillors: Marion Bateman, Mel Buckley, Tina Claydon, Gladys Healey, Hilary McGuill, David Mackie, Debbie Owen and Linda Thomas

APOLOGY: Councillor Jean Davies

ALSO PRESENT: Councillors: Mared Eastwood and Dave Hughes attended as observers. Mr Mark Morgan (as a Member of the Standards Committee)

SUBSTITUTION: Councillor Ian Hodge (for Councillor Carol Ellis)

CONTRIBUTORS: Councillor Christine Jones (Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing); Chief Officer (Social Services); Senior Manager - Safeguarding and Commissioning; Senior Manager Children and Workforce and Commissioning Manager

Representatives of Betsi Cadwaladr University Health Board:
Mr. Dyfed Edwards - Chair
Carol Shillabeer - Chief Executive
Elin Gwynedd - Chief of Staff
Michelle Greene - Integrated Health Community Director (East)

IN ATTENDANCE: Democratic Services Manager and Democratic Services Officer

37. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

None.

38. MINUTES

The minutes of the meeting held on 7 December 2023 were approved as moved by Councillor Dave Mackie and seconded by Councillor Gladys Healey.

RESOLVED:

That the minutes be approved as a correct record.

39. BETSI CADWALADR UNIVERSITY HEALTH BOARD

The Chair of Betsi Cadwaladr University Health Board (BCUHB) thanked Members for the invite and the opportunity to share some of the developments of the Health Board and advised that they welcomed communication at any time. He explained that 11 months ago, he had been asked to step in as Interim Chair along with three independent members and an Interim Chief Executive due to the Government

placing the whole of BCUHB into special measures concerning issues around governance, performance of certain services and issues around the Board and their relationships and interaction. He stated that they were now in a more stable position as they had a permanent Chief Executive and would have a full complement of independent members by March. He advised Members that over the coming months, they would be holding public meetings across the region to engage with communities, third sector groups and the public to understand their needs and concerns. He agreed that the Health Service had to change as the model that they had at the moment was not sustainable as it was geared to deal with the pressures of at the acute level of services. He stressed that more energy and resources had to be put into primary community care. He ended by saying that the last 11 months had been challenging but that he felt quite confident and that there were huge opportunities for them to do good things for the health agenda in North Wales.

The Chief Executive of BCUHB introduced herself and stated that it was a pleasure and a big challenge to join the Health Board in North Wales and could see huge potential in North Wales for great partnerships to deliver great services within the region.

The Integrated Health Community Director (East) advised Members that she had worked for BCUHB for a year and was proud to do so. She stated that their successes and strengths were when they worked together with Local Authorities as they had the same vision, strategies and aims. She emphasised that patients did not really care who they get the care from or how it worked just as long as it was seamless.

In response to a question raised by Councillor Healey, the Chair of BCUHB stated that the first public meeting would be held on 30th January in Denbigh and that they would be visiting all 6 local authority areas between now and the summer and would let them have further information when they had it.

Councillor Healey further questioned what was happening with primary care due to the closure of the majority of community hospitals and asked why GPs sent patients to A&E rather than the relevant department. She also questioned why mental health patients were not able to see relatives on the ward and why they had to meet elsewhere eg Wrexham Maelor in the café area.

The Chief Executive of BCUHB responded by thanking her for her questions and explained that things had changed enormously over the years and would continue to change. One of the standout changes had been within primary care due to workforce changes. She advised that GP surgeries now had a range of professionals eg physios and mental health practitioners etc which should be encouraged but there was a need for the right number of GPs. She informed Members that discussions had recently taken place concerning ways to attract more trainees into general practice and that she anticipated that further down the line they would be in a better position but recognised that it was quite a challenge.

The Integrated Health Community Director (East) explained that there were other pathways rather than A&E if the GP was not able to provide the care. She advised that some Community Hospitals had IV services but explained that if a different antibiotic needed to be used then the safest place was with medical support. She explained that people with mental health issues may not always be at their best and to provide dignity

to the rest of the ward, visitors to the ward were limited and other visiting areas were provided.

Councillor Marion Bateman had concerns about primary care and wanted to know who decided that E-consult was a good idea especially where the elderly where concerned. She also had concerns with A&E, ambulance and general waiting times for appointments. The Chair of BCUHB thanked Councillor Bateman for raising points and advised that people should contact the Health Board if they have any issues in order to improve the service. He explained that he had sympathy with users of E-Consult as technology did not always work as they wished, but emphasised that the first contact with the health service was vital. He further explained that issues with experiences within Acute Services were not related to the medical treatment they received but that it was the way in which people used the service. He emphasised that A&E should only be used for emergencies and people should change the way they used it, pointing out by working together they could try and influence this.

The Chief Executive of BCUHB added that approximately 300 people across the Health Board would be delayed in hospital at any one time and explained that they did not have the community services needed due to workforce constraints and the lack of money to do big expansions without taking it from elsewhere within the system which would be the probable solution. She advised that 176 beds had been added to the system to relive the pressure and agreed that it was an all year round pressure and not just a winter pressure and wanted to thank staff for the work that they were doing despite challenges.

The Integrated Health Community Director (East) clarified that as at today there were 62 patients in Wrexham Maelor who were medically optimised which equated to two and a half wards which indicated that it was the system that was not working and not A&E. She added that the longest wait in hospital to date was 104 days after being medically optimised which was not to be criticised as it was due to a complex package of care that was needed. She explained that measures had been put in place over the last 12 months to try to relieve the pressure on A&E with the addition of the Community Resource Team who treated people in care homes and people flagged as priority patients to see if they could refer them to another service rather than going to A&E. There had also been an increase in community resources with advanced healthcare practitioners as well as the increased opening hours for Mold MIU to six days with the hope of increasing to 7 but they would need more staff.

In response to the Chair on the effect on Social Services concerning bed blocking, the Chief Officer (Social Services) stated that a lot of the pressures were workforce related within all areas. He advised that there was no easy answer to bed blocking as the pressures were within the UK wide health and social care system and to solve it long term would need significant financial investment to attract people into the jobs and that in the meantime they needed to be creative and proactive. He added that the development at Marleyfield had added 16 beds to support the health and social care sector and that there was a commitment to develop Croes Atti in the future.

In response to numerous questions raised by Councillor McGuill, the Chair of BCUHB advised on two points; firstly that the financial situation and the way the budget worked was previously different in the Health Board than in Local Government but now things had changed; and nationally the Government Minister had said there was to be

no overspending and that £180m of savings needed to be made in order to ensure that they go forward with the budget that they receive from Welsh Government. He stated that as agreed with the Government, their priority investments were set out in their annual plan and special measures programme.

The Chief Executive added that overall there was just under a 4% uplift and that it was a challenge as they knew that with inflationary pressures that the ask was around 8 or 10%. She explained that some of that budget allocation for the Health Service was held at Government level for pay etc and that it was not as much as they needed but was probably better than they had hoped and that there would be a big savings programme to become financially sustainable in the longer term.

Secondly in connection with the question raised about Board Members and experience of social care and awareness, the Chair of BCUHB advised that there was currently one person who was an ex member of Social Care Wales, another person who had experience of Social Care in Local Government and other members who had general knowledge but overall they had a good mix of experience in addition to links with Local Government.

In response to the question raised by Councillor McGuill about Dentists visiting schools, the Chief Executive of BCUHB advised that mobile dental units were still being used in rural areas and that there was a growing number of dental therapists that could do a lot of work that dentists carried out and that the dental provision would change shape over the coming years. She advised that the Government had set out a new ambition around dental care. The Integrated Health Community Director (East) added that the current legislation stated that dental therapists could only provide treatment as part of a treatment plan which could only be prescribed by a dentist and that as things changed in the future, she could see therapists being able to start treatment plans but currently they would not be able to go into schools to do a treatment plan.

In connection with the question she raised about Hospice at Home, the Chief Executive of BCUHB explained that there was a difference of opinions from individuals about the last days of life and that they wanted to give people a choice so if people wished to spend their last days at home they would do all they could to support that.

In response to the question about GP Liaison Groups, the Chief Executive advised that some practices had Patient forums and that they wanted to encourage those who stepped down during the pandemic to come back as they were useful to the Health Board as a measure of how well the services were running and any experience issues.

The Integrated Health Community Director (East) advised that it was not sustainable at the moment to have an MIU in Deeside as in Mold and Holywell as it would require recruitment but that it was part of their medium term plan as they currently had 4 trainees. She stated that they had a lot of issues adding a 6th day in Mold and that they needed to make one service sustainable before introducing another.

She went on to answer Councillor McGuill's question concerning Hospital at Home and advised that it was a huge service that interlinked the Community Resource Team with Care Homes and Acute Trust as well as a number of other services. She stated that it was a clinically driven service that provided wraparound care to enable

people to go home with the necessary equipment. She explained that it was a big invisible part of their system and that the Health Board invested about £1.6m per year in the East.

In response to her last question concerning improvements to alleviate social pressures, the Integrated Health Community Director (East) advised that there were currently 32 patients who so far this year had 100 bed days with nothing acutely wrong with them and staged by working together they can help change that.

The Democratic Services Manager asked when and how a response to the written questions that were submitted prior to the meeting would be provided. In response, the Chair of BCUHB advised that they would be sent to the Committee Clerk to be circulated to Members and that they welcomed any further questions.

The Chair and Members thanked the Betsi representatives for attending the meeting.

40. FORWARD WORK PROGRAMME AND ACTION TRACKING

The Democratic Services Manager presented the current Forward Work Programme and Action Tracking as set out in the report for consideration and welcomed any questions from Members.

Councillor McGuill requested that the Social Services budget requirements list, which had been previously issued last June, be circulated to Members to enable them to come up with ideas prior to the budget meeting to try to reduce the budget without reducing the services. The Chief Officer (Social Services) advised that the requirements for the budget had changed significantly since last June and the report by the S151 Officer would give the updated position. He explained that Social Services needed to find efficiencies for the year ahead and that proposals would be explained at the workshops next week which would give Members time to make any additional proposals prior to the special meeting on 9th February. He added that the detailed budget was shared routinely and would be shared.

Councillor Bateman referred to the second item on Action Tracking concerning information on statutory and non-statutory services and the Chief Officer (Social Services) confirmed that the report containing that information would be provided at the meeting on 9th February.

The Chair confirmed that the meeting on 24th June 2024 would cover a request made by Councillor Mackie concerning the situation with Care Homes.

The Democratic Services Manager advised that he would chase the Chief Executive of BCUHB for a date when they would receive a response to the questions that were submitted to them.

The recommendations within the report were moved by Councillor Gladys Healey and seconded by Councillor Hilary McGuill.

RESOLVED:

(a) That the Forward Work Programme be approved;

(b) That the Facilitator, in consultation with the Chair of the Committee be authorised to vary the Forward Work Programme between meetings, as the need arises; and

(c) That the Committee notes the progress made in completing the outstanding actions.

41. MEMBERS OF THE PRESS IN ATTENDANCE

There were no members of the press in attendance.

(The meeting started at 2.00 pm and ended at 3.46 pm)

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Chair

SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE
9 FEBRUARY 2024

Minutes of the Special Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held as a hybrid meeting on Friday 9 February 2024

PRESENT: Councillor Arnold Woolley (Chair)
Councillors: Mel Buckley, Tina Claydon, Carol Ellis, Gladys Healey, Dave Mackie, Hilary McGuill, Debbie Owen and Linda Thomas

ALSO PRESENT: Councillors Dave Hughes and Paul Johnson

SUBSTITUTION: Councillor Jason Shallcross (for Councillor Marion Bateman)

CONTRIBUTORS:
Councillor Christine Jones (Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing);
Chief Executive, Chief Officer (Social Services);
Senior Manager – Children's Services
Senior Manager - Safeguarding and Commissioning;
Senior Manager Children and Workforce and Commissioning Manager
Strategic Finance Manager and Principal Accountant for Social Services

IN ATTENDANCE: Social Care & Environment Overview & Scrutiny Facilitator and Democratic Services Officers

42. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

None.

43. COUNCIL FUND BUDGET 2024/25

The Strategic Finance Manager introduced the report which provided an overview of the progress so far and reflected on the disappointing funding which was received from Welsh Government (WG). She provided an outline on the impacts on the portfolios of the Council and the proposals for Social Services which were being presented today.

The Chief Officer (Social Services) commented that the portfolio had done its part to enable the Council to obtain a balanced budget.

The Senior Manager for Children's Services referred to the proposed efficiency proposals for Children Services which included an update on the Council's 5 residential care properties, information on the service review of Adult and Children's Services and the use of grant funding opportunities.

The Senior Manager for Integrated Services and Lead Adults referred to the work which had been undertaken looking at a number of areas whilst not impacting frontline services. Information was provided on the review of Adult Services, effective

in-house services keeping people out of hospital and the difficulties with regard to recruitment. An update was provided regarding Marleyfield and the approach by Betsi Cadwaladr University Health Board (BCUHB) to increase the funding that they provided for this service. An overview of the review which had taken place with NEWCIS around the stores items purchased was given together with information on how grant funding was targeted and used differently.

The Senior Manager for Safeguarding and Commissioning provided information on how the vacancy management and recruitment challenges within frontline roles were protected. Information was provided on the reduction in the regional contribution and the work undertaken by the Regional Partnership Board and Regional collaboration team. She then referred to the Appointee and Deputyship Service charges, the work undertaken looking for efficiency savings within contracts with the third sector and young adults who attend residential college. An update was also given on Older People's Commissioning and Care Commissioning.

The Chief Officer (Social Services) explained that point 1.07 in the report provided a list of ongoing risks for the portfolio which was adversely impacted by the difficulties with recruitment and retention of social workers. He referred to the in-year Government grants and the growth in service demand for Adult and Children's Social Care.

Councillor Dave Mackie thanked officers for all the work carried out and the additional work done to address budget reductions. He referred to the section within the report around all Portfolios being asked to revisit their cost base to look again at potential ways of reducing budgets or removing cost pressures to contribute more to meeting the remaining gap, and asked if the Social Services Portfolio had set a target for further reducing budget?

In relation to the proposed charge for appointee services, Councillor Mackie asked how much would the cost be per individual and also in relation to the proposed Disability services charging for college placements, how much would the charges be?

The Senior Manager for Safeguarding and Commissioning explained that in relation to the proposed charge for appointee services, the Council had been looking at what other Local Authorities were doing across England and Wales and the proposal would be around £10/£20 per week. This was being investigated at the moment, and officers appreciated it was a sensitive topic so would require consultation with those affected and their families to make sure the charge was fair and equitable. In relation to charging for college placements, the Senior Manager advised that, from initial early work carried out, it was anticipated that this would potentially affect less than 5 people per year and would be for those new to the process and not those with existing college placements. Any proposed charges would be shared with families as part of the decision-making process.

Councillor Carol Ellis asked what the affect would be of the proposed reduction in Commissioning Care Fees? Also, in relation to Domiciliary care, what affect would officers anticipate the reduction in budget having on hospital discharges? Councillor Ellis also raised concerns around the proposed Deferral of Children's residential budget pressures and the impact this could have on the Out of County Placements budget which currently did not meet demand.

The Chief Officer (Social Services) said that, in relation to the Care Commissioning budget, the Council had a proud record in supporting its care sector partners, with the Council last year providing the highest increase of care rates across North Wales. There would be an increase, but it would not be in the order it was last year. Negotiations were sensitive and on-going.

The Senior Manager for Children's Services understood the concern around Out of County Placements but advised that the budget proposal did not mean that the Council was stopping its expansion of children's in-house residential provision. Due to challenges around recruitment, the home planned for 2024/25 would not be operational at the start of the year and therefore there would be a budget reduction for 2024/25 but this would be required as part of the 2025/26 budget. The Council continued to invest in services which would enable children to not need out of county provision in the first place, including working on a significant grant application to expand services to ensure children were safely supported without the need for out of county placements.

The Senior Manager for Integrated Services and Lead Adults said that the Council had an excellent reputation in relation to the hospital discharge service, but demand continued to increase. It was explained that by changing ways of working, speaking to patients earlier and working differently it was possible to maintain standards and reduce the budget. Having earlier referrals enabled a thorough discharge plan to be put in place with the Reablement teams involved.

In response to a question from Councillor Ellis around the increased contribution from BCUHB to Marleyfield Older People's Residential Care Home, the Senior Manager for Integrated Services and Lead Adults confirmed that this was their suggestion and therefore she was confident that this funding would be provided.

Councillor Hilary McGuill thanked officers for working on identifying budget reductions which she hoped would not affect front line services. In relation to proposed efficiencies to planned contracts with the third sector, she asked when would these be carried out and which third sector organisation would be affected? She also commented that MST and Mockingbird had saved the Council thousands and was pleased to see that this was now beginning to have a knock-on effect financially for the Council but sought reassurance on whether the Council would be able to reap back financial contributions next year?

Councillor McGuill said that she felt more assured around the proposed reduction in Commissioning Care Fees, having listened to the response from the Chief Officer that the Council would remain on par with neighbouring Local Authorities. Similarly with the proposed Disability Services charging for college placements, she felt that the charge would be on par with what other parents contributed when their children go away to college, but the introduction of this charge needed to be managed sensitively.

Councillor McGuill also commented that whilst the increased contribution from BCUHB was welcomed, this was a significantly small amount in comparison to the money the Council was savings BCUHB on an annual basis.

The Senior Manager for Safeguarding and Commissioning advised that as part of commissioning, the Council undertook a review of efficiencies of contracts and how well they were utilised. The efficiencies identified were small but by re-engineering the way services were commissioned it enabled the ones with great value to those that access them to continue. In relation to the proposal to charge for college placements, the Senior Manager advised that all placements would be financially assessed to ensure that the costs families faced were evenly distributed and that the costs were not detrimental to those most in need.

The Senior Manager for Children's Services referred to the continued positive impact of MST and Mockingbird and explained how the benefits were being seen in Education and Schools with an increase in children and young people presenting with complex and challenging behaviour and needs. The success of the MST service had seen 91% of children continue to remain at home. The service was seen as cost avoidance rather than a saving but was really important. Information was also provided on the 3 Mockingbird hubs which had been inspected by CRW fostering services which had identified the positive impact that this had on children in fostering care.

Councillor Gladys Healey thanked officers for the report. She said that mental health issues in children was increasing and said that she would not like to see reductions to funding for mental health services for children. She also agreed with increasing in-house support to children who need out of county placement and again would not like to see further budget reductions in out of county placements.

Councillor Healey referred to Domiciliary Care and asked had the Council looked at pay in Wrexham which was higher than in Flintshire.

The Senior Manager for Children's Services explained how the early intensive timely support for children and parents/families with mental health problems was very important. He spoke about the Council's continued investment in its own services in relation to reducing the budget pressure around out of county placements.

The Chief Officer advised that there was no national agreement with regard to care worker pay, which was why pay differed across Counties.

Councillor McGuill referred to the Register of children who were not in education and asked if this was shared with Social Services. The Senior Manager for Children's Services commented that some children were at home because of parental choice and that some had lost their school placements. The service was committed to working together collaboratively to understand behaviours and trigger points to keep pupils in schools with CAMHS support. There were a growing number of exclusions which meant that this was more important. Education was a strong indicator and appropriate information and intelligence was shared with regard to a family.

Councillor Healey asked if the portfolio worked with the home-schooling officer. The Senior Manager said that he was not aware of this joint working but explained that this was reported to the joint meeting with Education Youth & Culture Overview & Scrutiny Committee. The Committee wrote to WG raising concerns around the increased number of children who were electing home education. The Authority had to work within the legislative powers it had.

The recommendation within the report was moved and seconded by Councillors Dave Mackie and Gladys Healey.

RESOLVED:

That the Social Services portfolio's options to reduce budgets be noted.

44. STATUTORY AND NON-STATUTORY SERVICES - SOCIAL SERVICES

Introducing the report the Chief Officer (Social Services) explained the purpose was to identify which services were statutory and non-statutory as there was no national agreement in place. Point 1.01 of the report outlined the various legislations in place for Social Services with the Social Services & Wellbeing (Wales) Act 2014 being the primary legislation for the portfolio. Point 1.04 of the report highlighted that the vast majority of the services provided were statutory with the Learning Disabilities Transformation Fund, Flying Start and Vacancy Management the three which were non-statutory.

The recommendation within the report were moved and seconded by Councillors Dave Mackie and Councillor Gladys Healey.

RESOLVED:

That the Committee note the provision of the listed statutory and non-statutory services included

45. CORPORATE PARENTING CHARTER: A PROMISE FOR WALES

In presenting the report the Senior Manager for Children's Services referenced the launch by Welsh Government (WG) of the Corporate Parenting Charter: A Promise for Wales in September 2023. Information was provided on the 11 principles and 9 promises which were contained within the Charter and formed part of an ambitious vision for transforming Children's Services in Wales. It was explained how the Young Ambassadors who had attended the Care Leavers Summit and met Welsh Government Ministers had developed the shared vision for the future, these included young people from Flintshire. It was explained that if Flintshire signed the Charter and Promises it must ensure that the promises and ambitions were heard within the council with young voices involved. Work had been undertaken to deliver this to ensure that it was successful and once the Council had signed up it was proposed to report back annually on the progress and difference that it was making.

In response to a question from Councillor Carol Ellis, the Cabinet Member for Social Services confirmed that this would be presented to Cabinet and full Council to enable every member to be part of the process.

Councillor Hilary McGuill was delighted that this was here for all Councillors to sign and referred to the work undertaken by the children on the Childrens Services Forum who were an asset to the Council. They had assisted with processes around the interview process and housing and their contributions had been invaluable.

The first recommendation was moved and seconded by Councillors Hilary McGuill and Carol Ellis

The second recommendation was moved and seconded by Councillors Gladys Healey and Mel Buckley.

RESOLVED:

(a) That that committee recommends that Flintshire County Council adopts 'the pledge' and adopts the Corporate Parenting Charter: 'A Promise for Wales.'

(b) That the Children's Services Forum take a lead in measuring organisational success and commitment to the Corporate Parenting Charter.

46. MEMBERS OF THE PRESS IN ATTENDANCE

There were no members of the press or public in attendance.

(The meeting started at 10.00 am and ended at 11.25)

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Chair

SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Date of Meeting	Thursday 6th June 2024
Report Subject	Forward Work Programme and Action Tracking
Report Author	Social & Health Care Overview & Scrutiny Facilitator
Type of Report	Operational

EXECUTIVE SUMMARY

Overview & Scrutiny presents a unique opportunity for Members to determine the Forward Work programme of the Committee of which they are Members. By reviewing and prioritising the Forward Work Programme Members are able to ensure it is Member-led and includes the right issues. A copy of the Forward Work Programme is attached at Appendix 1 for Members' consideration which has been updated following the last meeting.

The Committee is asked to consider, and amend where necessary, the Forward Work Programme for the Social & Health Care Overview & Scrutiny Committee.

The report also shows actions arising from previous meetings of the Social & Health Care Overview & Scrutiny Committee and the progress made in completing them. Any outstanding actions will be continued to be reported to the Committee as shown in Appendix 2.

RECOMMENDATION	
1	That the Committee considers the draft Forward Work Programme and approve/amend as necessary.
2	That the Facilitator, in consultation with the Chair of the Committee be authorised to vary the Forward Work Programme between meetings, as the need arises.
3	That the Committee notes the progress made in completing the outstanding actions.

REPORT DETAILS

1.00	EXPLAINING THE FORWARD WORK PROGRAMME AND ACTION TRACKING
1.01	Items feed into a Committee's Forward Work Programme from a number of sources. Members can suggest topics for review by Overview & Scrutiny Committees, members of the public can suggest topics, items can be referred by the Cabinet for consultation purposes, or by County Council or Chief Officers. Other possible items are identified from the Cabinet Work Programme and the Improvement Plan.
1.02	In identifying topics for future consideration, it is useful for a 'test of significance' to be applied. This can be achieved by asking a range of questions as follows: 1. Will the review contribute to the Council's priorities and/or objectives? 2. Is it an area of major change or risk? 3. Are there issues of concern in performance? 4. Is there new Government guidance of legislation? 5. Is it prompted by the work carried out by Regulators/Internal Audit? 6. Is the issue of public or Member concern?
1.03	In previous meetings, requests for information, reports or actions have been made. These have been summarised as action points. Following a meeting of the Corporate Resources Overview & Scrutiny Committee in July 2018, it was recognised that there was a need to formalise such reporting back to Overview & Scrutiny Committees, as 'Matters Arising' was not an item which can feature on an agenda.
1.04	It was suggested that the 'Action tracking' approach be trialled for the Corporate Resources Overview & Scrutiny Committee. Following a successful trial, it was agreed to extend the approach to all Overview & Scrutiny Committees.
1.05	The Action Tracking details including an update on progress is attached at Appendix 2.

2.00	RESOURCE IMPLICATIONS
2.01	None as a result of this report.

3.00	CONSULTATIONS REQUIRED / CARRIED OUT
3.01	In some cases, action owners have been contacted to provide an update on their actions.

4.00	RISK MANAGEMENT
4.01	None as a result of this report.

5.00	APPENDICES
5.01	Appendix 1 – Draft Forward Work Programme Appendix 2 – Action Tracking for the Social & Health Care OSC.

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	Minutes of previous meetings of the Committee as identified in Appendix 2. **Contact Officer:** Margaret Parry-Jones Overview & Scrutiny Facilitator **Telephone:** 01352 702427 **E-mail:** Margaret.parry-jones@flintshire.gov.uk

7.00	GLOSSARY OF TERMS
7.01	**Improvement Plan:** the document which sets out the annual priorities of the Council. It is a requirement of the Local Government (Wales) Measure 2009 to set Improvement Objectives and publish an Improvement Plan.

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Forward Work Programme

Date of meeting	Subject	Purpose of Report	Scrutiny Focus	Responsible / Contact Officer	Submission Deadline
27 June 24 2pm	Safeguarding in Education including Internet Safety and Social Media	To provide an update on the discharge of statutory safeguarding duties in schools and the Education portfolio. To include information on Relationship and Sexual Education and how this was contributing to reducing harm.	Assurance	Chief Officer (Education & Youth) and Healthy Schools Practitioner	
	Additional Learning Needs and Education Tribunal (Wales) Act 2018	To outline the approach to the identification and commissioning of education for Flintshire young people.	Assurance	Senior Manager – Inclusion & Progression	
	Children Looked After in Flintshire	To provide an update on the provision for Looked After Children. And to provide an update on the challenges, positive working and how young people were supported through the pilot to provide funding directly to looked after children leaving care.	Assurance	Senior Manager – Inclusion & Progression	
	Looked After Children Placements - Outcome of the review and impact on FCC local policy	To outline the outcome of the review and impact on FCC Policy	Assurance	Senior Manager – Inclusion & Progression	

	Social Media and Internet Safety Period Dignity Update	To provide Members with an update on the Portfolio's Social Media and Internet Safety policy and provision. To provide Members with an update on the Council's support for Period Dignity.	Assurance Assurance	Learning Adviser - Health, Well-being and Safeguarding Learning Adviser - Health, Well-being and Safeguarding	
18 July 24 10.00 am	Council Plan 2022-23 Year End Performance Annual Director's Report	To consider the end of year performance report for Social Services To receive the final draft of the Director's Annual Report.	Performance monitoring Pre-decision	Chief Officer – Social Services Chief Officer – Social Services	
5 September 24 2.00 pm	Comments, Compliments and Complaints	To consider the Annual Report.	Assurance	Chief Officer – Social Services	
24 October 24 2.00 pm					
5 December 2.00 pm					
17 January 25 10.00 am	RISCA Annual Report	To receive the annual report	Assurance	Mark Holt	
24 March 25 10.00 am					
9 May 25 10.00 am					
5 June 25 2.00 pm					
17 July 25 10.00 am					

Regular Items

Month	Item	Purpose of Report	Responsible/Contact Officer
	Safeguarding	To provide Members with statistical information in relation to Safeguarding - & Adults & Children	Chief Officer (Social Services)
May	**Educational Attainment of Looked After Children**	Education officers offered to share the annual educational attainment report with goes to Education & Youth OSC with this Committee.	Chief Officer (Social Services)
Sept	**Comments, Compliments and Complaints**	To consider the Annual Report	Chief Officer (Social Services)
January	**Betsi Cadwaladr University Health Board Update**	BCUHB are invited to attend on an annual basis – partnership working.	Facilitator

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Action tracking from Social & Health Care OSC June 2024

Item/Date	Discussion	Action	By whom	Status
29 February 2024 RISCA Responsible Individual Report	Cllr Hilary McGuill asked if Rota Visits could be re-instated for Members of the Committee.	Rota Visits to be re-instated.	Mark Holt	Ongoing. Mark is meeting with the Contracts Team to progress the re-instatement of rota visits.
29 February 2024 Contextual Safeguarding	Cllr Hilary McGuill asked that examples of some of the 27 referrals be provided.	Information to be provided to the Committee. Frankie Norcross to contact Laura D'Arcy to provide the information	Frankie Norcross/ Laura D'Arcy	Completed

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SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday 6th June 2024
Report Subject	Safeguarding Adults and Children's Annual Report
Cabinet Member	Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

To provide Members with information in relation to the Joint Adults and Children's Safeguarding provision within the county boundaries.

In line with the Council's strategy for developing a systematic Performance Management Framework, Social Services routinely collate safeguarding activity for all aspects of safeguarding. This report is to inform Members of key statistical and performance related information about children and adults at risk for whom the Authority has significant safeguarding and corporate safeguarding responsibilities.

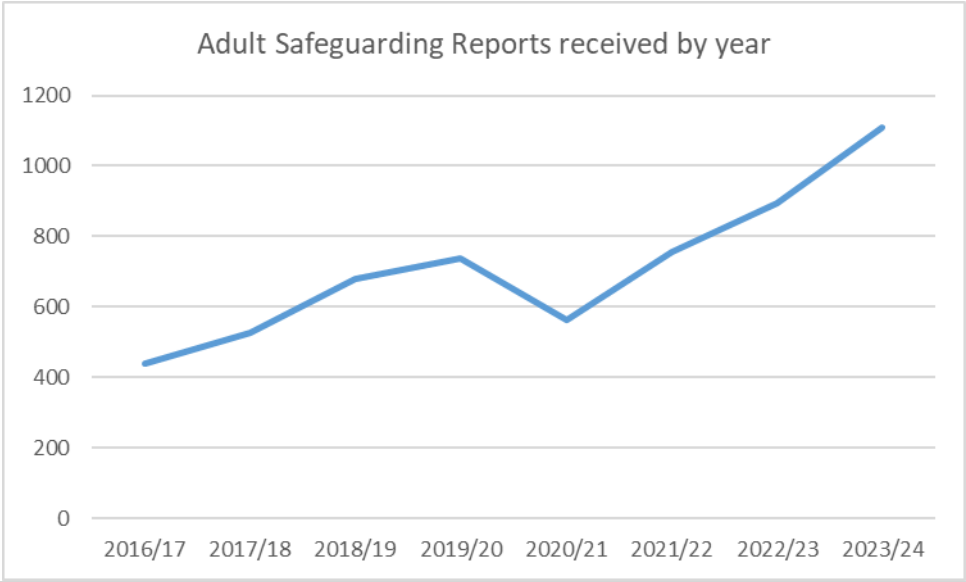
RECOMMENDATIONS	
1	That Members accept this report as relevant information in relation to Flintshire Safeguarding for the period 1st April 2023 to 31st March 2024 and additional information provided.
2	That Members take due regard to the variety of activity across the Safeguarding Unit and the continuing development and improvement in service provision.
3	That the Committee is satisfied that the Safeguarding Process for Adults and Children in Flintshire is robust.

REPORT DETAILS

1.00	EXPLAINING THE ACTIVITY OF THE SAFEGUARDING UNIT
1.01	The Flintshire Safeguarding Unit has been a single unified team since early 2016. The Safeguarding Unit Service Manager reports directly to the Senior Manager for Safeguarding and Commissioning. The team currently comprises 26 people and is based in County Offices Flint. They have close working relationships with Children and Adult Social Care and key partner agencies both locally and regionally.
1.02	The Safeguarding Unit oversees all aspects of work related to their core responsibilities which are: • Child Protection (CP) • Adult Safeguarding (AS) • Adults at Risk (AAR) • Deprivation of Liberty Safeguards (DOLS) • Children Looked After (CLA) The Safeguarding Unit team are also involved in Regional Safeguarding Board sub-groups including delivery groups, policy and procedures, performance and quality audit groups; delivery of training for both adults and children, child practice review and adult practice reviews when required and investigations. In addition to our own internal case file audits, the team have completed audits to support practice and development of internal teams within Children's Services and Adult Services.
1.03	**National Safeguarding Procedures** In November 2019, Wales become the first part of the UK to introduce a single set of safeguarding guidelines to help protect children and adults at risk, with the launch of the new Wales Safeguarding Procedures mobile app. The procedures set out what to do if anyone working with children or adults suspect an individual is experiencing, or at risk of, abuse, neglect, or other kinds of harm. Uniquely there are no printed copies of the procedures. Instead, they are available to everyone online, either via the dedicated Wales Safeguarding Procedures website or a mobile app. This means that there will always be a single up-to-date version available to all practitioners. It will also make finding information quick and easy. A recent update was communicated to the whole of Wales virtually, so version control is easier to manage. 'Pointers for practice' are featured throughout both the web and app versions of the procedures and provide simple 'how to' guidance for practitioners. These draw on the latest research and practice developments. Both platforms feature a searchable glossary which makes it easier for people to work in partnership by ensuring that every practitioner is using the same terminology in the same way, irrespective of their sector or professional discipline. Many of the changes within the children's procedures are about practice. The procedures place an emphasis on aspects such as co- production,

	person centered approaches, advocacy, use of reflective practice and practitioner judgement. Importantly, there is a strong focus on the 'daily lived experience of the child and their carer' which forms an integral part of information gathering, assessments and recording. The procedures refer to the Social Worker "seeing the child", not just setting eyes on them. Safeguarding processes remain largely consistent to the previous All Wales Procedures with some key changes. The Regional Safeguarding Board has produced a 'quick guide' to the key changes for both adults and children and these can be found in the appendix. Flintshire produced a Practice Directive to ensure changes were understood locally.
1.04	**Deprivation of Liberty Safeguards (DOLS)** The Safeguarding Unit has three full-time Best Interest Assessors (BIAs) who are responsible for undertaking Best Interest Assessments for individuals who meet criteria in accordance with the Mental Capacity Act Deprivation of Liberty Safeguards. In October 2022 we secured a second Senior Practitioner who is solely responsible for DOLS and ensuring standards are maintained. The Safeguards apply to people in care homes and hospitals, and the local authority is responsible for assessing Flintshire residents in care homes. A person is deprived of their liberty if they: • Lack mental capacity to agree to live in the care home and • Are under continuous supervision and control and • Would be prevented from leaving the care home if they were to try to do so. Deprivations of Liberty in Flintshire care homes are assessed by a BIA and by a specialist doctor. Numbers of applications have increased year on year from 13 applications in 2013-2014 (before a significant new judgement, known as Cheshire West, widened the scope of DOLS) to the number of applications received in 2023/24 being 606**.** The number of referrals received means that careful prioritisation is needed to ensure that those most in need receive assessments. The impact of the lockdown was felt in the subsequent months when access to people residing in care homes was restricted or in many cases, not allowed at all. All the applications received in the period came from Care Homes. The majority of people are located in Flintshire homes; however a substantial amount of people can be in placements outside the reporting authority, which made assessments more difficult to obtain after March 2020. Whilst travel was legitimate, access to people in Care Homes was limited. Keeping the person at the centre of the assessment has been a priority and the supervisory body gratefully acknowledges the support of the care homes and our assessors in making sure we have been able to continue to provide this person-centred response. The DOLS process is currently subject to Internal Audit, the findings of which will be available within the next few months.

1.05	**New Liberty Protection Safeguards (LPS)** It has been recognised nationally for quite some time that DOLS is “not fit for purpose”, as the numbers of people deprived of their liberty exceed the resources available to manage the assessments required. In 2018 the UK Government published a Mental Capacity (Amendment) Bill which became law in April 2019 and was due to be implemented in October 2020. The Bill set out a new model, the Liberty Protection Safeguards, which was due to replace DOLS in England and Wales. The new implementation timescales have been substantially delayed by the pandemic and subsequently. A recent consultation ended on 14 July 2022 and all Local Authorities were notified sometime afterwards that the Government had decided to pause all plans to implement the new LPS model. Latest information suggests that LPS will not be implemented until after the next General Election and then this will very much depend on priorities of the newly formed Government.
1.06	The new Liberty Protection Safeguards were intended to: • Cover people of sixteen years and over (DOLS applied to people of eighteen and over) • Apply to people living in the community as well as to people in care homes and hospitals • Put more responsibility on the providers and commissioners of care to gather the assessments required and to send them into the responsible body. • Expect the responsible body (which will in many cases be the local authority) either to authorise the deprivation of liberty or, if the person being assessed appears to be objecting to the placement, to arrange for a more in-depth assessment from an Approved Mental Capacity Professional. • Give people the right to appeal to the Court of Protection if they wish to appeal against the deprivation of their liberty. The LPS scheme applies to community settings, as well as to care homes and hospitals. It also applies to anyone from 16 years old and above, rather than 18 as is the case with DOLS. The Safeguarding Unit continue to work to current DOLS guidance while preparing for the possible implementation of LPS. We have been cited on documentation, models of practice and training modules for some time. In the interim representatives of the Safeguarding Unit regularly attend the Flintshire LPS Project Group who review and monitor any updates in relation to this new model. We now await UK Government legislative change anticipated in the next political cycle.
1.07	**Adult Safeguarding and Adults at Risk** The Social Services and Wellbeing (Wales) Act 2014 (SSWBA) expects the Local Authority to undertake relevant enquiries and decide on next steps within 7 working days of receipt of an adult safeguarding report.

	Between 1st April 2022 and 31st March 2023, **638** adult safeguarding reports that met the threshold for enquiries under Section 126 were completed, with 88% of enquiries being completed within seven days. Between 1st April 2023 and 31st March 2024, **667** adult safeguarding reports that met the threshold for enquiries under Section 126 were completed, with 90% of enquiries being completed within seven days. This reflects an increase in demand year on year, with the same amount of resource within Safeguarding. Over the last 12 months, 1st April 2023 to 31st March 2024, **1,109** reports have been received at the Single Point of Access (SPOA), reflecting an expected level of activity for the period. Many of those referrals come to Adult Safeguarding for advice and consultation before they are processed so the volume coming into the Local Authority impacts on both teams substantially. Most of these referrals have involved Neglect and Physical Abuse. Referrals are becoming more complex and financial abuse is an increasing trend within Adult Safeguarding. The number of Adult Safeguarding reports have continued to increase putting pressure on the team to screen initial referrals and undertake our duty to enquire. Year on year the number of safeguarding referrals has increased from 440 in 2016/17, 526 in 2017/18, 679 in 2018/19, 736 2019/20, 562 in 2020/21 and 755 in 2021/22. 895 in 2022/23 and 1109 in 2023/24. 
1.08	The Adult Safeguarding Team have convened 246 strategy meetings between 1st April 2023 and 31st March 2024. The Adult Safeguarding Team undertake internal audits on a regular basis to identify areas for development and ensure consistency of approach. Flintshire employs an Adult Safeguarding Social Worker whose role is to enquire and investigate referrals as required and to work closely with families and individuals to keep them informed of the process, the actions being undertaken and the outcomes. As a result of this work we have

	noticed that very few individual or families ask to be involved with Case Conferences as they have already been a part of the process and fully engaged. Our numbers for adult safeguarding conferences remain low. The team are continuing to promoting the use of advocates to allow those with no voice to be engaged in the process. The role of advocates is integral to a number of areas of work within safeguarding. Advocacy Services are used as Relevant Person's Representatives (RPRs) when undertaking DOLS assessments. When Adult Safeguarding reports are received, consideration is always given to the subject of the referral and whether they require independent advocacy services to ensure their needs are met and their voice is heard. This was an area picked up in the recent inspection and work is being undertaken to improve the recording of advocacy offers across all areas of work. The Adults at Risk team work closely with a variety of partner agencies including housing, police and health particularly in relation to Self-Neglect and Hoarding Cases. Until recently the Adults at Risk Team have held cases of complex need where there is an identified Neurodevelopmental issue. A new post has been developed within the Disability Service, to work with 16 – 18 years olds transitioning into adulthood and adults with neurodevelopment diagnosis. This will allow the Adults at Risk Team to focus their resource into shorter terms pieces of work. Other work undertaken by the Adult Safeguarding and Adults at Risk team includes: • Attending various internal team meetings and third sector organisations to ensure safeguarding processes are understood, differences between adult safeguarding and adults at risk pathways are clear • Collaborative working with Flintshire SPOA to strengthen links with the front door and provide advice and assistance where required • Identifying themes for inappropriate referrals and working with organisations to improve their submissions • Providing in house learning events in conjunction with Adult Social Care colleagues, following an Adult Practice Review outcome, to ensure key messages were communicated to operational staff • Working with Police colleagues to improve communication and enable more timely strategy discussions when required. A Teams chat has been enabled by IT, along with colleagues from Children's Social Care which has ensured referrals are assessed holistically • Attendance at MARAC, Modern Slavery and Human Trafficking MARAC, MAPPA • Chairing and decision making around Section 5 processes, allegations against professionals
1.09	**Children's Safeguarding and the Child Protection Register** The purpose of the Child Protection Register (CPR) is to keep a confidential list of all children in Flintshire who have been identified as being at risk of significant harm in accordance with the categories of abuse within the All Wales Child Protection Procedures (AWCPP) 2008. The same categories are reflected in the new Wales Safeguarding Procedures. The Safeguarding Unit are responsible for maintaining the CPR, providing information to

	relevant partner agencies about children on the register and ensuring that Child Protection plans are formally reviewed in accordance with the Wales Safeguarding Procedures.
1.10	**Number on the Register** Numbers on the register fluctuate as cases progress through the system. If risk reduces, children may be removed from the register and supported through more informal means. If risk increases, cases can progress into court proceedings and children can be taken into care. The Safeguarding Unit have no control over the number of referrals into First Contact nor do they have influence over which cases come to conference. A decision to place a child on the register is a multi-agency decision which again cannot be influenced by the Safeguarding Unit chairperson. A recent inspection identified the fact that in some cases, the threshold for significant harm was not always met when considering removing a child from the register. This is sometimes linked to a lack of understanding from partner agencies in terms of risk and harm. This is being addressed through training and dissemination of relevant information. At the end of March 2019 there were 131 children on the register. At the end of March 2020 there were 201 children on the register. At the end of March 2021 there were 146 children on the register. At the end of March 2022 there were 131 children on the register. At the end of March 2023 there were 216 children on the register. At the end of March 2024 there were 170 children on the register. At the time of writing, we currently have 187 children on the register with 173 of those being Flintshire Children and 14 being temporary registrations. They are children registered in another Local Authority area who are currently resident within Flintshire. These children could be on holiday or could be in the process of relocating permanently. It should be noted that other areas in North Wales have experienced similarly high levels of registered children. An internal audit was undertaken last year to determine whether there were any trends or reasons for the high numbers. Over the past 12 months we have had large numbers of multiple sibling families which has increased the overall total. The audit did not identify any concerns in practice.
1.11	**Categories of Risk** For the past two years the highest category has been emotional abuse as a single category with the next highest being Physical and Emotional abuse. This year the highest category remains Emotional Abuse and Neglect. Emotional Abuse unfortunately continues to be linked with high levels of reported Domestic Abuse, usually linked to alcohol and/or drug misuse.
1.12	**Length of Time on the Register** Children on the register are reviewed in line with AWCPP guidelines. Initially at three months and thereafter within six months.

	Children reaching their 3rd review are automatically reviewed under Public Law Outline and are subject to a Legal Advice Meeting (LAM) to identify whether the case should be moving into court proceedings. The LA have developed a toolkit in relation to the PLO process and this was identified as good practice in the recent inspection. Provision of a PLO Buddy for children and young people ensures that the voice of children is heard throughout proceedings. A Conference Buddy is allocated for all young people coming to conference to ensure their journey through the child protection process is documented. Children's Safeguarding Managers regularly review cases that have been on the register for 12 months or more. The findings are reported to Senior Managers and discussed within Regional Safeguarding Delivery Groups. Current information shows 57 young people from 23 families had been on the CPR for more than 12 months. There are processes in place with Children's Services Service Managers to ensure such cases are reviewed within Legal Advice Meetings and Senior Managers meetings to ensure there is no drift. All cases of re-registration within 12 months of de-registration are audited on behalf of the Safeguarding Board each year. During the period 01/04/2023 to 31/3/2024 there were 13 children registered from seven families to the Child Protection Register within 12 months of their previous registration.
1.13	**Number of Child Protection Case Conferences Held** The breakdown for the number of case conferences held is given below. Up to 8 conferences a week are chaired and minuted by the Safeguarding Unit. Initial case conferences are convened within 15 working days of the strategy decision to come to conference and reviews are held as stated in above. From April 2023 to March 2024, 89% of initial child protection conferences and 98% of review conferences were carried out within statutory timescales. Any conferences that have to go outside timescales are agreed with the Service Manager for Social Care and Safeguarding. In the interim, Children's Social Services ensure immediate safeguarding issues are managed with relevant partner agencies and Safety Plans are put in place. 725 Child Protection Conferences were held between 1st April 2023 and 31st March 2024. Other work undertaken by the Children's Safeguarding Team: • Provision of training to Designated Safeguarding Person (DSP) Level 3 Education Training Programme. This enable the Child protection Chairs to meet with head teachers to ensure they are able to embed their training in line with Flintshire processes • Relaunching the Case Conference and Core Group multi agency training which provides attendees with a comprehensive overview of

	their role in a case conference. This is also linked to the Child protection Rapid Review Action plan where it was identified that work was needed to improve outcomes from Core Groups • Undertaking a Core Group audit along with colleagues from Performance and Children's Social Care
1.14	**Children Looked After** The number of Children Looked After (CLA) has previously remained relatively steady but has been increasing both locally, regionally and nationally. In part the number has increased due to the number of Unaccompanied Asylum Seeking Children we are asked to accommodate and support. Currently 9.9% of our CLA population are UASC. At the end of March 2024 there were 241 children being looked after by the Local Authority, 63 with Flintshire Foster Carers and 77 living with their parents or with relatives under connected person arrangements. Three Special Guardianship Orders have been made so far this year since 1st April 2023. Between 1st April 2023 and 31st March 2024, 91 children started to be looked after, 95 have left care and there have been 81 placement moves. Children can leave care for a number of reasons, either going home to their families, becoming adopted or reaching 18 years of age where they no longer need to be reviewed under looked after procedures. Children can receive support and services up to the age of 19 from transition services. Young people can also be supported through Pathway Plans up until they are 24 years old should they need this input. There are 4 Independent Reviewing Officers (IROs), within the Safeguarding Unit who review Care Plans and ensure placements are appropriately supporting the children. Flintshire Children are in the main located with Flintshire Foster Carers or at home under Placement with Parents regulations. However, IROs do have cases as far as South Coast of England, North of England and Ireland and they are expected to travel to the placement address to hold their reviews. This has an evident impact on available resources. IROs hold a number of reviews virtually or face to face meetings and travel across the UK to visit their cases when required.
1.15	**Links to the Regional Safeguarding Board** The Strategic shared priorities of the Board are: 1. To respond effectively to the learning identified from Practice reviews / Regulatory Inspections and other reviews. (NWSB) 2. Effective engagement and communication: To improve engagement and consultation with children and adults at risk, vulnerable groups, professionals, and partnerships (NWSB)

	3. To continue to ensure a robust, resilient, and consistent approach to emerging safeguarding themes (NWSB) The North Wales Safeguarding Annual Report provides a detailed narrative around the previous priorities. Members of the Safeguarding Unit support the work of the Board by attending Policy and Procedure subgroups, Audit groups, Task and Finish groups and Section 5 meetings.
1.16	**Learning from Child Practice Review (CPR), Adult Practice Reviews (APR) and Domestic Homicide Reviews (DHR)** In accordance with the Safeguarding Boards (Functions and Procedures) (Wales) Regulations 2015 (which came into force 6 April 2016), Safeguarding Boards have a statutory responsibility to undertake multi-agency practice reviews in circumstances of a significant incident where abuse or neglect of an adult at risk is known or suspected and the adult or child has died, sustained potentially life threatening injury or serious and permanent impairment of health or development. Practice guidance for completing practice reviews has been issued under section 145 Social Services and Well-Being (Wales) Act 2014. The purpose of practice reviews is to learn lessons, to inform and improve practice. The outcome of a review is intended to generate professional and organisational learning and promote improvement in future inter agency protection guidance. Practice reviews do not seek to apportion blame. There are two types of review: • Concise Practice Reviews – when the person was not referred to services for protection within 6 months of the incident or death • Extended Practice Reviews – when the person was referred to services in the 6 months prior to the incident or death If the criteria for the above is not met, a decision can be made to hold a Multi-Agency Professional Forum (MAPF) which is a learning event that sits outside the Regional Safeguarding Board APR/CPR review sub group. MAPF utilise case information, findings from audits, inspections and reviews to develop and disseminate learning to improve local knowledge and practice and also inform the Safeguarding Board's future audit and training priorities. Domestic Homicide Reviews (DHRs) were established on a statutory basis under section 9 of the Domestic Violence, Crime and Victims Act (2004). This provision came into force on 13th April 2011. Community Safety Partnerships are required to undertake them. The Community Safety Partnership then monitors the action plan. The purpose of a DHR is to examine the circumstances that led to a reported death and review the contact that organisations had with the victim and offender also identifying lessons to be learnt.

1.17	**Flintshire Adult Practice Reviews (APRs), Child Practice Reviews (CPRs) and Domestic Homicide Reviews (DHRs)** When cases come to the attention of safeguarding, consideration is always given to whether a case should be recommended for APR or MAPF (Multi Agency Professionals Forum). This consideration is also part of the safeguarding audit tool. Adult Locality teams can also refer cases to the APR subgroup as can any agency. Consideration for a CPR is usually determined within a PRUDIC (Procedural Response for Unexplained Death in Children) meeting however, again any agency can refer to the CPR subgroup. **CPRs** • Currently in Flintshire a CPR recently concluded and the report was published last December 2023. There has already been a learning event for staff and agencies involved in the case. All staff, across all agencies, are offered emotional support following such cases. • An extended review was also recently commissioned by the Regional Board in September 2023 and is due to commence shortly. • Another CPR commissioned 2 years ago has been officially paused until the outcome of the criminal investigation. Staff involved in this case have been provided with full support and advice. **APRs** There are currently no active Flintshire APRs awaiting sign off or allocation. The North Wales Region has been adhering to the Social Services and Wellbeing (Wales) Act (SSWBA) by actively considering cases that would fit the criteria for APR/CPR. This has a resource impact on all agencies and there has been an issue with delays in commencing reviews due to scarcity of trained reviewers, however, the Board is addressing this issue through training. **DHRs** A DHR was commissioned following a death in Shotton in 2021. This report has been with the Home Office for over 6 months awaiting approval and feedback.
1.18	**Learning from CPRs and APRs** • When relevant CPRs are published nationally, Practice Directives are drafted by Flintshire's Children's Services Team Managers with summaries of the key issues and these are shared with all teams • The Regional Safeguarding Board send out weekly bulletins highlighting published CPRs and APRs regionally • Learning events are held following CPRs and APRs where practitioners meet to discuss key themes and lessons from the investigations.

	• Action Plans emanating from CPRs and APRs are monitored locally and regionally through the Safeguarding Board and through the Flintshire & Wrexham Children's Delivery Group and the Flintshire & Wrexham Adult Delivery Group, subgroups of the Children's and Adults Regional Boards • Specific recommendations from other Local Authority CPRs/APRs can come from other agencies for action within Social Services. All CPR and APR Final Reports are published on the Welsh Government website and North Wales APR and CPR Reports are also published on the North Wales Safeguarding Board website for a short period of time. Social Services managers and staff are acutely aware that the key messages from National, Regional and Local APRs/CPRs are usually about lack of information sharing and poor communication between partner agencies. Flintshire Social Services are well informed about current themes and trends in outcomes of APRs/CPRs. Case file audits, supervision, legal advice meetings, multi-agency case management meetings, learning and training workshops, access to online research and case discussion are all tools to ensure outcomes from APRs/CPRs are at the forefront of the work that is undertaken in Flintshire to safeguard children, adults and families. The Business Systems Team has recently assisted in building a platform within the client information system to record, monitor and review all CPRs and APRs. Provision of a central database will support better communication of learning outcomes across the Local Authority.

2.00	**RESOURCE IMPLICATIONS**
2.01	**Revenue:** there are no implications for the approved revenue budget for this service for either the current financial year. **Human Resources:** there are no implications for additional capacity or for any change to current workforce structures or roles.

3.00	**IMPACT ASSESSMENT AND RISK MANAGEMENT**
3.01	This report is for information only.

4.00	**CONSULTATIONS REQUIRED/CARRIED OUT**
4.01	N/A

5.00	APPENDICES
5.01	**Wales National Safeguarding Procedures** http://www.safeguarding.wales/ http://www.diogelu.cymru/ **Wales National Safeguarding Procedures FAQs** https://www.northwalessafeguardingboard.wales/wp-content/uploads/2019/11/Wales-Safeguarding-Procedures-Frequently-Asked-Questions.pdf https://www.bwrdddiogelugogleddcymru.cymru/wp-content/uploads/2019/11/Cwestiynau-Cyffredin-am-Weithdrefnau-Diogelu-Cymru.pdf **Wales National Safeguarding Procedures What has changed Adults** https://www.northwalessafeguardingboard.wales/wp-content/uploads/2020/06/Whats-Changed-Adults-Eng.pdf https://www.bwrdddiogelugogleddcymru.cymru/wp-content/uploads/2020/06/Beth-syn-Wahanol-Diogelu-Oedolion.pdf **Wales National Safeguarding Procedures What has changed Adults** https://www.northwalessafeguardingboard.wales/wp-content/uploads/2020/06/Whats-Changed-Children-Eng.pdf https://www.bwrdddiogelugogleddcymru.cymru/wp-content/uploads/2020/06/Beth-syn-Wahanol-Diogelu-Plant.pdf **North Wales Safeguarding Board Strategic Plan 2024/25** https://www.northwalessafeguardingboard.wales/wp-content/uploads/2024/03/NWSB-Annual-Plan-2024-25-Final.pdf **North Wales Safeguarding Board Annual Report 2022/23** https://www.northwalessafeguardingboard.wales/wp-content/uploads/2023/07/NWSB-Annual-Report-2022-23-Final.-docx-1.pdf

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	N/A

7.00	CONTACT OFFICER DETAILS
7.01	**Contact Officer:** Jayne Belton Safeguarding Unit Service Manager **Telephone:** 01352 702600 **E-mail:** jayne.belton@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	(1) **Looked After Child** Looked after children are children and young people who are in public care and looked after by the state. This includes those who are subject to a care order or temporarily classed as looked after on a planned basis for short breaks or respite care. The term is also used to describe 'accommodated' children and young people who are looked after on a voluntary basis at the request of, or by agreement with, their parents. (2) **Section 47 Investigation** Where information gathered during a Referral or an Assessment, results in the social worker suspecting that the child is suffering or likely to suffer Significant Harm, a Strategy Discussion Meeting should be held to decide whether to initiate enquiries under Section 47 of the Children Act 1989. Strategy Discussions/Meetings should be held as soon as possible, bearing in mind the needs of the child. A Section 47 Enquiry will decide whether and what type of action is required to safeguard and promote the welfare of a child who is suspected of, or likely to be, suffering significant harm. (3) **Section 126 Enquiry** Section 126 (2) of the SSWBA sets out that 'if a local authority has reasonable cause to suspect that a person within its area (whether or not ordinarily resident there) is an adult at risk, it must: a) Make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken (whether under the Act or otherwise) and if so, what, and by whom; and b) Decide whether any such action should be taken.' (4) **Liberty Protection Safeguards** The Liberty Protection Safeguards will replace DoLS and is due to be implemented in October 2020. LPS will: • Cover people of sixteen years and over (DoLS applied to people of eighteen and over) • Apply to people living in the community as well as to people in care homes and hospitals • Put more responsibility on the providers and commissioners of care to gather together the assessments required and to send them into the responsible body. • Expect the responsible body (which will in many cases be the local authority) either to authorise the deprivation of liberty or, if the person being assessed appears to be objecting to the placement, to arrange for a more in-depth assessment from an Approved Mental Capacity Professional.

	• Give people the right to appeal to the Court of Protection if they wish to appeal against the deprivation of their liberty.

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SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday 6th June 2024
Report Subject	Age Friendly Communities
Cabinet Member	Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

This report provides an update on the development of age-friendly communities in Flintshire and seeks commitment for ongoing support across portfolio areas.

The Welsh Government 'Strategy for an Ageing Society' sets out the actions needed to enable people in Wales to age well and to live within age-friendly communities. To support this strategy, Welsh Government funding is provided to all local authorities to support them to apply for and maintain membership of the World Health Organisation (WHO) Global Network of Age-Friendly Cities and Communities.

In May 2023, Flintshire County Council received confirmation of its successful application to join the WHO Age-friendly Network having demonstrated the breadth of engagement with older people and range of age-friendly services and initiatives in the county.

As members of the WHO Network, Flintshire has developed an age-friendly plan to outline the actions needed for communities in Flintshire to become more age-friendly. This plan is based on local and national policy and strategies, and on priorities and needs identified through community engagement. The plan is a working document and will evolve in line with changing priorities and new and emerging strategies.

Flintshire is meeting commitments to provide online information hubs and to share best practice examples across Wales and globally. This has included contributions to the Welsh Government's Age-friendly Wales newsletter. In addition, a presentation was made by citizens from Flintshire community groups, supported by the Social Services' team, at the Older People's Commissioner's Age-Friendly Wales Conference on 8th November 2023. This work was very well received and is described further in the detail section of this report.

RECOMMENDATIONS	
1	That Scrutiny note the progress made to develop age friendly communities in Flintshire including the successful application for membership of the World Health Organisation Global Network.
2	That Scrutiny commit to the continued support and collaboration of all portfolio service teams to help develop Flintshire as a great place to live for the ageing population.

REPORT DETAILS

1.00	EXPLAINING AGE FRIENDLY COMMUNITY DEVELOPMENT
1.01	Global Network of Age-Friendly Communities membership In February 2023, Flintshire County Council applied to join the World Health Organisation (WHO)'s Global Network of Age-Friendly Cities and Communities. The application demonstrated existing age-friendly projects and initiatives that are taking place across Flintshire and highlighted opportunities for future age-friendly development identified through planning processes, wellbeing assessments and ongoing engagement with older people and older people's groups. In May 2023, the Council was notified that Flintshire's membership application had been successful, the second local authority in Wales to join the Global Network. Flintshire is now part of a growing global movement of communities that are striving to better meet the needs of older residents. As members of the Global Network, Flintshire commits to sharing and promoting the values and principles central to the WHO's age-friendly approach and actively participating in the Network, including sharing experiences with other members. A public profile page for Flintshire has been created on 'Age-friendly World,' with an online portal for global network members to share information and experiences. This portal will increase the visibility of Flintshire's work and inspire change in other areas. All network members are asked to submit at least one "Age-friendly practice" per year. The Digital Flintshire Hub, which supports people to use the internet in a safe and effective way, was recently shared as a good practice example for increasing digital inclusion for those seeking support to access online services and activities. Planning is in progress for the sharing of best practice examples in the future.
1.02	National Age-friendly Networks As a member of the Global Network, Flintshire is eligible to join the UK Network of Age-friendly Communities. Supported by the Centre for Ageing Better, the UK Network aims to inspire change across the UK by sharing good practice, connecting communities to share information, knowledge, and experience, and providing support for identifying evidence-based solutions. Regular peer calls provide an opportunity for leads of UK Network member communities to connect with one another, problem-

	solve, and learn about effective age-friendly practice. UK Network membership also enabled community groups in Flintshire to apply for grant funding which supported an event to mark Ageism Awareness Day in March 2024. To support the growth of the age-friendly communities in Wales, Welsh Government has established a network of participating counties. Quarterly meetings are held with age-friendly leads in each county to provide opportunities for good practices to be shared, and to highlight common issues that might benefit from collaboration. This forum contributes to the production of an Age-Friendly Wales quarterly newsletter to showcase good practice across Wales. Flintshire provided an article for the July 2023 issue marking the county's membership of the WHO Network and highlighting examples of developments in progress. This article is provided in the appendices for information.
1.03	<u>Age-friendly Flintshire Hub</u> A requirement of Age-friendly Network membership is the development of web-based content to provide information and support to communities in relation to age-friendly activities and services. The Age-friendly Flintshire Hub provides background information and will be developed to raise awareness of age-friendly services and good practice that is being developed in communities across Flintshire.
1.04	<u>Age-friendly Wales Conference</u> On 8th November 2023, the Older People's Commissioner for Wales held a conference to celebrate the action underway to make Wales an age-friendly nation and explore ways of working together to ensure communities support everyone to age well. Flintshire was one of four local authorities invited to share examples of good practice through citizen presentations. Representatives from Age & dementia-friendly Holywell and Age-Friendly Leeswood and Pontblyddyn delivered short presentations on the projects and initiatives taking place in their communities. Positive feedback about Flintshire's presentation was received from the Older People's Commissioner for Wales. Letter attached in appendices for information. The Chairperson of Cymru Older People's Alliance also commended the Flintshire presentation, saying "It was great to hear the Flintshire presentation at the Age Friendly Communities Conference in Cardiff today. The examples showed how older people have been involved from the outset and at a grass roots community level. Well done to the team."
1.05	<u>Community Engagement</u> Community engagement is a key driver for the implementation of Flintshire's age-friendly development plans. The Social Services Transformation, Integration and Ageing Well Team lead this engagement, with valuable support from colleagues across all Council portfolio teams. A

	summary of the key engagement and development activities in 2023, is provided here for information. ▪ School-based lunch clubs in collaboration with Newydd catering to provide healthy affordable food, social interaction, and opportunities for intergenerational activities. ▪ Dementia awareness school projects incorporating the arts to enable primary school children to raise awareness and understanding of dementia in local communities. ▪ Community hubs to increase awareness of information and support services that can improve wellbeing for older people. ▪ Weekly information sharing to provide a 'what's on' view and highlight community activities for older people. ▪ Collaborative community work to increase digital inclusion through digital tablet courses and equipment loans. ▪ A partnership approach with officers from Access & the Natural Environment and Streetscene & Transportation made access improvements and developed local community walking routes to support increased physical activity for older people. ▪ Community based strength and balance sessions to provide a physical and mental wellbeing approach to encourage older people to re-engage with their community. This included partnership working with Aura 60+ Active Leisure, who provide weekly exercise sessions in leisure centres across the county for people of all ages and abilities. This partnership development enabled the strength and balance class to be delivered in a community setting in Hope. ▪ Support to the Flintshire 50+ Action Group to identify priorities for action and to help plan and promote the annual International Day for Older People celebration event held on 30th September 2023. This popular event was attended by more than a hundred people who socialised, had access to information from a range of health, social care, public service and third sector providers and celebrated the positive work in the county. ▪ Ageism Action Day Event in Holywell on 18th March 2024 provided opportunities for older adults from the local community to engage with pupils from Ysgol Maes y Felin to share their skills and experiences and talk about positive aspects of ageing.

2.00	**RESOURCE IMPLICATIONS**
2.01	**Revenue:** There are no direct revenue implications highlighted by this report. A Welsh Government grant wholly funds the post of Ageing Well Engagement Officer and activities to support community engagement.

	Welsh Government has confirmed ongoing funding into 2024/25 to support local authorities to appoint an age-friendly lead and undertake projects and activities that help to develop and maintain age friendly communities as part of the Global Network membership commitment. **Capital:** There are no capital resource implications. **Human Resources:** An Ageing Well Engagement Officer post has been recruited for a fixed term period. This post will be reviewed if Welsh Government funding is reduced or ceased beyond 2024/25. Support from all Council portfolio teams is essential to develop age friendly communities and maintain successful membership of the network. This includes the provision of information regarding age-friendly good practices on the World Health Organisation's website. This will not require additional resources as the scope and objectives align closely to the Council's current policies and commitments to older residents. Social Services will lead the project and seek information and support from other teams as required.

3.00	**IMPACT ASSESSMENT AND RISK MANAGEMENT**
3.01	The development of age friendly communities and membership of the WHO Age-friendly Network has a positive impact on the lives of older people and other residents and community groups. Developing age friendly, safe, and accessible communities positively influences the wellbeing of residents, and communities benefit through sharing good practice locally, across Wales and the global network. The development of age-friendly communities is not a finite project but is an ongoing process, and the needs and aims of people over fifty are varied. The implementation of the 'Age-friendly Flintshire Plan' will evolve and adapt to provide appropriate solutions to reflect the diversity of the community and to changing priorities and new and emerging policies.

4.00	**CONSULTATIONS REQUIRED/CARRIED OUT**
4.01	The Social Services Transformation, Integration and Ageing Well Team undertake continuous engagement with older people to identify priorities and actions for inclusion in the Age-friendly Flintshire Plan. The team works closely with internal and external partners on related programmes that influence the age-friendliness of communities. This includes contributions to the Place Making planning process to shape the future of town centres in Flintshire; working with Flintshire Local Voluntary Council (FLVC) to develop more Connected Communities to reduce the risk of loneliness and social isolation; developing Dementia Friendly services and amenities in partnership with North-East Wales Carers Information Service (NEWCIS).

	The team co-ordinated a response to the Local Authority recommendations highlighted in the Older People's Commissioner for Wales's 'Access Denied' report on Digital exclusion published February 2024. This response was supported by policy and governance officers and highlights the impact that advances in technology and digital information have on people who are digitally excluded or have limited digital skills. The report and Council response are attached in appendices for information.

5.00	**APPENDICES**
5.01	Age Friendly Wales Newsletter Article – July 2023
5.02	Older People's Commissioner Letter of Thanks
5.03	Older People's Commissioner Access Denied report and Local Authority response.

6.00	**LIST OF ACCESSIBLE BACKGROUND DOCUMENTS**
6.01	Link to Welsh Government 'Age friendly Wales: our strategy for an Ageing Society': https://www.gov.wales/age-friendly-wales-our-strategy-ageing-society Link to the World Health Organisation Global Network of Age-Friendly Cities and Communities profile page for Flintshire: https://extranet.who.int/agefriendlyworld/network/flintshire/ Link to the Digital Flintshire Hub good practice example on the World Health Organisation Global Network of Age-Friendly Cities and Communities Age-friendly practices (Age-Friendly world website): https://extranet.who.int/agefriendlyworld/afp/digital-flintshire-hub/ Link to the UK Network of Age-friendly Communities: https://ageing-better.org.uk/uk-network-age-friendly-communities Link to the Age-Friendly Flintshire Hub webpages: https://flintshire.gov.uk/en/Resident/Social-Services/Age-Friendly-Flintshire/Age-Friendly-Flintshire.aspx Link to Age-friendly Flintshire Plan summary: https://flintshire.gov.uk/en/PDFFiles/Social-Services/Age-Friendly-Flintshire/Plan-for-developing-age-friendly-communities-in-Flintshire.pdf

7.00	**CONTACT OFFICER DETAILS**
7.01	**Contact Officer:** Michael Jones, Wellbeing and Partnership Lead **Telephone:** 01352 702546 **E-mail:** michael.jones@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	Age-friendly Community An age-friendly community is defined by the World Health organisation as “a community where everyone, regardless of age can stay healthy and active and participate in the community, and where everyone is treated with respect.” Aura 60+ Active Leisure The 60+ Active Leisure scheme, provided in leisure centres across the county, supports people in Flintshire to live longer, better, and healthier lives by improving physical activity levels, confidence, strength, and balance. Cymru Older People’s Alliance (COPA) A small charity run by older people for older people so that local Older People’s Forums and groups can have their voices heard at the national level to Welsh Government and other Public Bodies. Flintshire 50+ Action Group A diverse group of older people from across Flintshire who provide a voice for citizens aged fifty and over. The group seeks to ensure that the views of older people are engaged in decisions and policies affecting them. The group also provide regular communications to people across the county through regular meetings, events, and newsletters. Flintshire Local Voluntary Council (FLVC) FLVC is the umbrella and support organisation for over twelve hundred voluntary and community groups in Flintshire. Global Network of Age Friendly Communities The WHO Global Network for Age-friendly Cities and Communities was established in 2010 to connect cities, communities, and organisations worldwide with the common vision of making their community a great place to grow old in. The mission of the Network is to stimulate and enable cities and communities around the world to become increasingly age-friendly. NEWCIS NEWCIS is one of the largest providers of carer services in Wales – delivering information, one to one support, training and counselling to carers who provide unpaid support to family or friends living in North East Wales. NEWYDD Catering Newydd Catering provides locally sourced sustainable catering services to schools and care homes in North Wales.

	Older People's Commissioner for Wales The Older People's Commissioner for Wales protects and promotes the rights of older people throughout Wales, scrutinising and influencing a wide range of policy and practice to improve their lives. The Commissioner's role is underpinned by a set of unique legal powers to review the work of public bodies and to hold them to account when necessary. Transformation, Integration and Ageing Well Team The Social Services project team for the development and implementation of age-friendly plans in Flintshire. The team is comprised of an Older People's strategy Co-ordinator and Ageing Well Engagement Officer, reporting to the Wellbeing and Partnership Lead within Adults Social Services. World Health Organisation (WHO) The WHO is the United Nations agency that connects nations, partners, and people to promote health, keep the world safe and serve the vulnerable. So, everyone, everywhere can attain the highest level of health and wellbeing.

July 2023

Llywodraeth Cymru
Welsh Government

Age Friendly Wales Newsletter

Welcome to our Age-Friendly Wales Newsletter. For this edition we would like to spotlight some of the activity that is enhancing people's well-being. This is highlighted as one of the 4 aims in ***Age Friendly Wales: Our Strategy for an Ageing Society*** and is an area of great importance, especially following the Covid pandemic.

We hope that you enjoy reading about some of the activity bringing communities together, promoting exercise and healthy ageing and helping reduce loneliness and isolation.

If you need any additional information, or would like to include a feature in a future newsletter, please contact the Older People's Rights team at **OlderPeopleandCarers@gov.wales**

SUPER AGERS PROGRAMME AND OLYMPAGE EVENTS

Bridgend County Borough Council is committed to using a range of activity programmes to bring older adults and their communities together with a range of regular weekly opportunities. The Super Agers programme is supported at a range of venues across Cwm Taf Morgannwg and has been running for the past 4 years.

The programme shapes activities for older adults giving them the opportunity to engage with people of all ages and take part in various activities. The Super Agers programme has found that older adults particularly enjoy the social components of the activities available, as well as the help and information they can gain whilst keeping active and the peer support networks they can build close to home.

The OlympAge Games is an annual inclusive and fun filled event that supports people of all abilities to take part in games and activities. The event is an exciting feature in the Bridgend calendar which is helping develop age-friendly communities and recognises the health and well-being benefits of encouraging people to exercise. Events are organised by the Bridgend County Borough Council Prevention and Well-being Team with partners including Halo Leisure, Awen Cultural Trust, Bridgend Older Peoples Forum, Shout, and many more including Bridgend College and local schools. Teams from local community groups, care settings and day centres across Bridgend participate in OlympAge and the participants compete in a range of games such as new-age bowling and curling, table tennis, basketball and target-throw.

Over the 4 years that OlympAge, teams have come forward from a variety of community, third sector and statutory groups including groups and individuals supported by the Community Coordinators and Community Navigators.

In the lead up to events, leaders visit settings across Bridgend such as community centres, village halls and leisure centres to engage with participants, develop the teams and highlight the importance of keeping mobile. Partners also develop their own offers to increase access to the opportunity which has boosted participant numbers and given people the chance to socialise and practice in sessions at venues near them.

Over 50 Bridgend College health and social care students and young leaders from secondary schools are on hand at events to support people to take part in activities. This gives our younger community practical experience with older community members and a fun opportunity for them to help make the day a success.

The most recent OlympAge Games event took place during intergenerational week in April and was a roaring success with a great deal of positive feedback.

The OlympAge events are part of a broader community-based programme of physical activity and well-being activities aimed at improving physical and mental well-being as well as combatting loneliness and isolation across our communities.

Bridgend has also taken forward similar approaches using cultural and creative activities with partners Halo Leisure and Awen Cultural Trust.

If you wish to find out more please contact Jane Thomas in the Prevention and Well-being Team at **Jane.Thomas@bridgend.gov.uk**

VIRTUAL REALITY IN CARE HOMES

The **“Inside – Outside”** project is led by Caerphilly Over 50 in collaboration with Caerphilly Council's Social Services Department. The use of virtual reality (VR) headsets in care homes is achieving positive outcomes for residents, including those with dementia.

Conceiving the “Inside – Outside” Project:

The onset of the Covid pandemic heightened our awareness of the limited opportunities care home residents have to see the outside world.

Virtual reality **360°** videos, viewed through a headset, are so realistic that the viewer is‘transported’ to another location. We thought that filming local beauty spots and attractions would be ideal to take into care homes. Residents with dementia might find it particularly beneficial to recall places that they remembered. We made a successful application to the National Lottery in mid-2020 to fund equipment and filming.

As soon as Covid restrictions permitted, we started the filming process. Although restrictions were lifted for the general population, were not able to enter care homes and give demonstrations. This made it possible for us to develop a portfolio of 20 videos ready to view [**YouTube**]. These included walks through Roath and Margam Parks, Caerphilly Castle, and over the hills in Cwm Darran. We also added a performance from an Elvis tribute act, as well as Caerphilly Male Voice Choir at rehearsals.

Care Home Demonstrations

Our first demonstration of VR headsets was in February 2023 in Min Y Mynydd Care Home, Rhumney where all the residents had been diagnosed with dementia. It was an amazing success demonstrating to a group of 8 residents and several carers. The carers soon took over positioning the headsets on the residents and interacting with them. At the end, they were all clamouring for us to return! Of course, we did.

In the spirit of Age-Friendly Communities co-production, we approached the manager of Caerphilly Council’s care homeswho had already received positive feedback from Min Y Mynydd but was still amazed at the immersive effect of using the headset. We have worked closely since

then. In particular, the Senior Care Officer has been instrumental in taking the headsets on her regular visits to the council care homes.

You can read the comments from these demonstrations in our website article:

Dementia Action Week

Care Home residents have thoroughly enjoyed watching the **360°** videos ("*absolutely marvellous", "fantastic" and "wonderful experience"*). Not only does watching the videos benefit the residents, it greatly enhances their interaction with their carers. One resident who had completely lost the ability to communicate became quite animated, pointing to things she recognised.

Resident Interaction video

The Future

The Senior Officers have agreed to embed this activity in their care home. We will spend the remainder of our grant to facilitate this by providing a further 3 headsets and a few more bespoke videos.

Our videos are not interactive but we trialled an interactive video to see how it was received. They thought walking on the seabed was marvellous!

Welsh Government has put us in touch with a technical group who are investigating the use of interactive VR and we have agreed to meet soon. We are not aware of any group using anything similar to our bespoke videos and are considering its extended application.

This concept has real potential for wider introduction beyond Caerphilly. If you wish to learn more about this project please contact Caerphilly Over 50 at **caerphillyoverfifty@gmail.com** or visit the COPA website: **https://www.copacharity.com/2023/05/27/virtual-reality-in-care-homes/**

SUPPORTING CARE HOME RESIDENT'S WELL-BEING

The Welsh Government is pleased to work with Age Cymru to support the well-being and mental health of older adults living in care homes. Age Cymru is leading on Welsh Government-funded projects to engage with care home residents, promote volunteering in care homes and scope the mental health support available to older people living in care homes.

We wanted to have a better insight into the lives and experiences of care home residents during the Covid-19 pandemic. The *Tell Me More* project worked with older people living in care homes using a creative combination of meaningful conversation techniques and artists to produce portraits of the residents. The short, animated film, voiced by the residents and using the portraiture, shares their views and hopes, and is very powerful testimony to the challenges they faced. You can watch the *Tell Me More* film and read the report here: **https://www.ageuk.org.uk/cymru/our-work/care-homes/tell-me-more/**

Age Cymru has built on the learning and success of the *Tell Me More* project over the last year by training care home staff and volunteers in the *Tell Me More* approach, to encourage meaningful conversations with the people they care for and find out what matters to them. This inspired care homes to create activities tailored to residents' interests and helped with the return to normality after the pandemic.

Volunteers make a positive difference in many walks of life and have a very valuable role to play in care homes. Their contribution can enrich the lives and experiences of people living and working in care homes. Age Cymru is working to increase and embed volunteering in care homes across Wales, linking with local organisations to recruit volunteers, and supporting and preparing the volunteers and care home providers for the placements. It will continue to raise the profile of volunteering in care homes and promote a sustainable volunteering model. In addition to direct support Age Cymru has published a **Care Home Volunteering Toolkit** to support care homes to recruit, train and manage their own volunteers.

We are interested to learn more about the mental health services and support available to older care home residents and older people moving into care homes. Age Cymru undertook a pilot project focussing on the experiences of people living in care homes in both urban and rural areas - Cardiff and Pembrokeshire - in accessing mental health support. The project also considered the specific support needs of veterans living in care homes given their background and life experience. Read the **report** here. Age Cymru will continue gathering and disseminating good practice in supporting people when moving into a care home. It will also work with Social Care Wales to consider how to include mental health support as part of care worker qualifications.

For further information on these projects please contact:
CareHomeTeam@gov.wales

AGE-FRIENDLY WALES UPDATE

Age-friendly Flintshire

In May, Flintshire was formally welcomed as a member of the World Health Organisation's Global Network for Age-friendly Cities and Communities. This is a recognition of the great work taking place to make Flintshire age-friendly and the long-term commitment to work with older people and others to make Flintshire a great place to grow older for everyone.

Flintshire has a low number of large towns with many smaller towns and villages, and a mix of industrial, commercial and rural areas. This presents an interesting challenge for the development of age-friendly communities. Initial development focused on engaging with local groups and organisations to understand priorities to enable people to live well as they aged. Local steering groups were established to identify opportunities to benefit communities across the county and provide some initial learning to inform ongoing age-friendly development.

Some of the age-friendly priorities identified include:

- Health and well-being services particularly in rural communities
- Safety of and respect for older, more vulnerable people in our communities
- Support to help people get online
- Social activities, groups and services for older people
- Information about groups, activities, services
- Transport in rural/hard to reach communities
- Training, volunteering, employment opportunities

Age-friendly development has focused on tackling these priorities. Highlights include:

Increasing awareness and understanding about people living with dementia

Staff and pupils in primary schools learn about dementia and are encouraged to make pledges to become a dementia friend (Alzheimer's society Dementia Friends initiative).

A number of pupils have also taken part in creative arts projects, and performed to their families, and older people from the local community. Feedback confirmed the project has increased confidence and understanding of dementia.

Helping people to get online and increase digital skills

The Covid pandemic highlighted the benefits of being online. Those who were digitally included were able to maintain contact with family and friends, join virtual activities and shop online. Working with partner organisations, Aura Libraries, Coleg Cambria, and Sheltered Housing teams, digital tablet loans and community training sessions have helped those who want to get online. For those less confident, support is provided through Flintshire Connects offices and community hubs to access online services.

Increasing confidence for older people to reconnect with their communities

As highlighted in the Older People's Commissioner for Wales report "**Leave no-one behind – action for an age-friendly recovery**" support was needed to help community groups and venues to re-open following the pandemic. Many groups rely on older volunteers to organise activities and following prolonged periods of shielding, confidence and mobility had reduced significantly. Aura Leisure helped to address this by running gentle exercise classes in the rural community of Hope and Caergwrle. Covid support grants also enabled groups to purchase

essential equipment and supplies to restart. Flintshire Local Voluntary Council worked with Social Services to recruit volunteers to restart activities and build sustainability.

Raising awareness about what's on in the community

Feedback confirms that although there are often many activities and groups taking place in communities, there can be a lack of information about what's on, when and where. Groups are being supported to develop community "What's On" leaflets shared in community venues, libraries, leisure centres, notice boards and published online. Information is also collated and shared by a dedicated Social Services Ageing Well Officer, and through Flintshire's Well-being network, Older People's network and by social prescribers.

Development of the **Age-Friendly Flintshire website** will also provide a focal point for sharing age-friendly good practice across Flintshire.

The success of this exciting project will be ensured through continued engagement with long-established older people's networks and close links with community groups, such as the 50+ Action Group. The Ageing Well team has developed an Age-friendly Flintshire action plan to provide a focused and collaborative approach to making Flintshire a great place to live for people of any age.

To find out more please contact Flintshire's Older People Engagement team at **opengagement@flintshire.gov.uk**

Anglesey joins the WHO Global Network for Age-friendly Cities and Communities

Anglesey has recently celebrated becoming the latest county in Wales to join the World Health Organisation's Global Network for Age-friendly Cities and Communities.

Becoming a member of the network marks a county-wide commitment to breaking down barriers to ageing well and secures Anglesey's status as an age-friendly island.

Much work has been done in recent months to support the work of creating an Age-Friendly Anglesey, which has included:

- The reintroduction of **Older People's Forums** after the pandemic and taking on community feedback to make the move from larger, central forums to smaller more local forums. Since March, eleven Older People's Forums have been held out in the community all across Anglesey and have been very well received.
- Hosting various **50+ Open Days** within the county's Leisure Centres which enable older people to access information from various services and charities face to face, have a go at different leisure activities for free, and enjoy some lunch and the chance to socialise.
- Producing and distributing over 2,500 copies of our **Anglesey Community Transport Directory**, which has information on all Community Transport schemes based on the island.

Anglesey Community Transport Directory (gov.wales)

- Producing a **Community Buildings Directory** to support more services to take their provision for older people out to the community
- Arranging numerous **Scam Awareness** trainings for older people in the community

Future plans include the continuation of Older People's Forums and the upcoming launch of a new Age Friendly Anglesey newsletter to help keep Anglesey's residents updated on all developments and the support available to them to help them age well.

Anglesey's Age-Friendly Champion, Councillor Gwilym Jones noted:

"On behalf of the Isle of Anglesey County Council and the island as a whole, I'd like to thank the Welsh Government and the Older People's Commissioner for Wales' team for their support during our journey to becoming members of the network. We look forward to building on this important relationship, and to develop exciting plans for the residents of Anglesey."

If you'd like to learn more about Age-Friendly Anglesey, please contact the Age Friendly Communities Development Officer, Sioned Young on **sionedyoung@ynysmon.llyw.cymru** or 01248 751 832.

EISTEDDFOD

National Eisteddfod: Question Time

Title: Age-Friendly Wales - Culture, Sport and the Arts

Location: Welsh Government Stand

When: 8 August 2023, 15:00 - 16:00

We know the importance of mental health and physical health if we are to live well and reach our full potential - Culture, sports and the arts have a huge role to play in achieving this goal , If we are serious about achieving our vision of an Age-Friendly Wales where everyone looks forward to getting older, we need to ensure that the opportunities to get involved, to visit and to volunteer meet the expectations and aspirations of older people across Wales.

On the panel will be:

- Brian Davies, Chief Executive, Sport Wales
- Lleucu Siencyn, Director of Arts Development, Arts Council of Wales
- Nia Williams, Director of Learning and Public Programmes, National Museum
- Aled Evans, Manager, Age Cymru Gwynedd a Môn

- Rhian Gibson, Director of Communications, Engagement and Partnerships, National Library of Wales

You will have the opportunity to hear about the vision of the guest speakers but also the opportunity to ask your questions. The Deputy Minister for Social Services will also be present and keen to discuss your ideas.

We shall look forward to seeing you.

Thank you for reading our newsletter!

ABOUT

This newsletter is produced by the Older People's Rights team in the Welsh Government and showcases good practice from a range of partners across Wales.

Find out more on the web:

Our Strategy for an AgeingSociety

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Cylchlythyr Cymru Oed-Gyfeillgar

Croeso i'n Cylchlythyr Cymru Oed-gyfeillgar. Yn y rhifyn hwn, hoffem dynnu sylw at rai o'r gweithgareddau sy'n gwella lles pobl. Amlygir hyn fel un o'r 4 nod yn ***Cymru o Blaid Pobl Hŷn: Ein Strategaeth ar gyfer Cymdeithas sy'n Heneiddio*** ac mae'n faes o bwysigrwydd mawr, yn enwedig yn dilyn pandemig Covid.

Gobeithiwn y byddwch yn mwynhau darllen am rai o'r gweithgareddau sy'n dod â chymunedau ynghyd, sy'n hybu ymarfer corff a heneiddio iach ac sy'n helpu i leihau unigrwydd ac unigedd.

Os oes angen unrhyw wybodaeth ychwanegol arnoch, neu os hoffech gynnwys erthygl nodwedd mewn cylchlythyr yn y dyfodol, cysylltwch â'r tîm Hawliau Pobl Hŷn yn **OlderPeopleandCarers@llyw.cymru**

RHAGLEN SUPER AGERS A DIGWYDDIADAU OLYMPAGE

Mae Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr wedi ymrwymo i ddefnyddio amrywiaeth o raglenni gweithgaredd i ddod ag oedolion hŷn a'u cymunedau ynghyd gydag amrywiaeth o gyfleoedd wythnosol rheolaidd. Cefnogir rhaglen Super Agers mewn lleoliadau amrywiol ar hyd a lled Cwm Taf Morgannwg ac mae wedi bod ar waith ers pedair blynedd. Mae'r rhaglen yn trefnu gweithgareddau ar gyfer oedolion hŷn

gan roi'r cyfle iddynt ymgysylltu â phobl o bob oed a chymryd rhan mewn gweithgareddau amrywiol.

Mae rhaglen Super Agers wedi gweld bod oedolion hŷn yn mwynhau elfennau cymdeithasol y gweithgareddau sydd ar gael yn arbennig, yn ogystal â'r cymorth a'r wybodaeth y gallant eu cael wrth gadw'n heini a'r rhwydweithiau cymorth cymheiriaid y gallant eu hadeiladu'n agos at adref.

Mae Gemau OlympAge yn ddigwyddiad blynyddol cynhwysol llawn hwyl sy'n cefnogi pobl o bob gallu i gymryd rhan mewn gemau a gweithgareddau. Mae'r digwyddiad yn nodwedd gyffrous yng nghalendr Pen-y-bont ar Ogwr sy'n helpu i ddatblygu cymunedau oed-gyfeillgar ac yn cydnabod manteision iechyd a lles annog pobl i wneud ymarfer corff. Trefnir digwyddiadau gan Dîm Atal a Lles Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr gyda phartneriaid gan gynnwys Halo Leisure, Ymddiriedolaeth Ddiwylliannol Awen, Fforwm Pobl Hŷn Pen-y-bont ar Ogwr, Shout, a llawer mwy, gan gynnwys Coleg Pen-y-bont ar Ogwr ac ysgolion lleol. Mae timau o grwpiau cymunedol lleol, lleoliadau gofal a chanolfannau dydd ledled Pen-y-bont ar Ogwr yn cymryd rhan yn OlympAge ac mae'r cyfranogwyr yn cystadlu mewn amrywiaeth o gemau fel bowlio oes newydd a chwrlo, tennis bwrdd, pêl-fasged a thaflu targed.

Yn ystod y pedair blynedd ers sefydlu OlympAge, mae timau wedi dod o amrywiaeth o grwpiau cymunedol, grwpiau trydydd sector a grwpiau statudol gan gynnwys grwpiau ac unigolion a gefnogir gan y Cydlynwyr Cymunedol a'r Llyw-wyr Cymunedol.

Yn y cyfnod cyn y digwyddiadau, mae arweinwyr yn ymweld â lleoliadau ledled Pen-y-bont ar Ogwr, fel canolfannau cymunedol, neuaddau pentref a chanolfannau hamdden i ymgysylltu â chyfranogwyr, datblygu'r timau a thynnu sylw at bwysigrwydd dal ati i symud. Mae partneriaid yn datblygu eu cynigion eu hunain hefyd i gynyddu mynediad i'r cyfle sydd wedi rhoi hwb i nifer y cyfranogwyr a rhoi cyfle i bobl gymdeithasu ac ymarfer mewn sesiynau mewn lleoliadau yn eu hymyl.

Mae 50 a mwy o fyfyrwyr iechyd a gofal cymdeithasol Coleg Pen-y-bont ar Ogwr ac arweinwyr ifanc o ysgolion uwchradd wrth law mewn digwyddiadau i gynorthwyo pobl i gymryd rhan mewn gweithgareddau. Mae hyn yn rhoi profiad ymarferol i'n cymuned iau gydag aelodau hŷn o'r gymuned a chyfle llawn hwyl iddynt helpu i wneud y diwrnod yn llwyddiant.

Cynhaliwyd y digwyddiad OlympAge diweddaraf yn ystod wythnos pontio'r cenedlaethau ym mis Ebrill ac roedd yn llwyddiant ysgubol gyda llawer iawn o adborth cadarnhaol.

Mae'r digwyddiadau OlympAge yn rhan o raglen ehangach o weithgarwch corfforol a gweithgareddau llesiant yn y gymuned gyda'r nod o wella lles corfforol a meddyliol yn ogystal â brwydro yn erbyn unigrwydd ac unigedd ar hyd a lled ein cymunedau.

Mae Pen-y-bont wedi datblygu dulliau tebyg gan ddefnyddio gweithgareddau diwylliannol a chreadigol gyda'i phartneriaid Halo Leisure ac Ymddiriedolaeth Ddiwylliannol Awen.

Os hoffech wybod mwy, cysylltwch â Jane Thomas yn y Tîm Atal a Lles yn **Jane.Thomas@bridgend.gov.uk**

REALITI RHITHWIR MEWN CARTREFI GOFAL

Arweinir y prosiect **"Tu Fewn – Tu Allan"** gan Dros 50 Caerffili mewn cydweithrediad ag Adran Gwasanaethau Cymdeithasol Cyngor Caerffili. Mae'r defnydd o bensetiau realiti rhithwir (VR) mewn cartrefi gofal yn sicrhau canlyniadau cadarnhaol i breswylwyr, gan gynnwys y rhai â dementia.

Creu'r prosiect "Tu Fewn – Tu Allan:

Fe wnaeth dyfodiad pandemig Covid ddwysáu ein hymwybyddiaeth o'r cyfleoedd cyfyngedig sydd gan drigolion cartrefi gofal i weld y byd y tu allan. Mae fideos realiti rhithwir **360°**, a welir drwy benset, mor realistig fel bod y gwyliwr yn cael ei 'gludo' i leoliad arall. Roeddem o'r farn y byddai ffilmio mannau hardd ac atyniadau lleol yn ddelfrydol i'w defnyddio mewn cartrefi gofal. Gallai preswylwyr â dementia ei chael yn arbennig o fuddiol dwyn i gof mannau roeddent yn eu cofio. Fe wnaethom gais llwyddiannus i'r Loteri Genedlaethol ganol 2020 i ariannu offer a gwaith ffilmio.

Cyn gynted ag yr oedd cyfyngiadau Covid yn caniatáu, aethom ati i ddechrau'r broses ffilmio. Er i'r cyfyngiadau gael eu codi ar gyfer y boblogaeth gyffredinol, nid oedd modd mynd i gartrefi gofal a rhoi arddangosiadau. Gwnaeth hyn hi'n bosibl i ni ddatblygu portffolio o 20 fideo yn barod i'w gwylio [**YouTube**]. Roedd y rhain yn cynnwys teithiau cerdded drwy Barc y Rhath a Pharc Margam, Castell Caerffili, a thros y bryniau yng Nghwm Darran. Fe wnaethom ychwanegu perfformiad gan act deyrnged Elvis hefyd, yn ogystal â Chôr Meibion Caerffili'n ymarfer.

Arddangosiadau Cartref Gofal

Roedd ein harddangosiad cyntaf o bensetiau VR ym mis Chwefror 2023 yng Nghartref Gofal Min y Mynydd, Rhymni lle'r oedd yr holl breswylwyr wedi cael diagnosis o ddementia. Roedd yr arddangosiad i grŵp o 8 o breswylwyr a sawl gofalwr yn llwyddiant anhygoel. Buan iawn y dechreuodd y gofalwyr gymryd yr awenau a gosod y pensetiau VR ar y preswylwyr a rhyngweithio â nhw. Ar y diwedd, roedden nhw i gyd yn erfyn arnon ni i ddychwelyd! Ac wrth gwrs, fe wnaethon ni hynny.

Yn ysbryd cyd-gynhyrchu Cymunedau o Blaid Pobl Hŷn, fe wnaethom gysylltu â rheolwr cartrefi gofal Cyngor Caerffili a oedd eisoes wedi cael adborth cadarnhaol gan Min y Mynydd ond a oedd yn dal i ryfeddu at effaith ymgolli defnyddio'r pensetiau. Rydym wedi cydweithio'n agos ers hynny. Yn benodol, mae'r Uwch Swyddog Gofal wedi bod yn allweddol gan fynd â'r pensetiau ar ei hymweliadau rheolaidd â chartrefi gofal y cyngor.

Gallwch ddarllen y sylwadau o'r arddangosiadau hyn yn ein herthygl ar y wefan:

Wythnos Gweithredu ar Ddementia

Mae preswylwyr Cartrefi Gofal wedi mwynhau gwylio'r fideos **360°** yn fawr iawn *("hollol wych", "ffantastig", "profiad gwych"*). Nid yn unig y mae gwylio'r fideos o fudd i'r preswylwyr, ond mae'n gwella eu hymwneud â'u gofalwyr yn fawr. Dechreuodd un preswylydd ymateb, a oedd wedi colli'r gallu i gyfathrebu'n llwyr, gan dynnu sylw at bethau yr oedd hi'n eu hadnabod.

Fideo Rhyngweithio Preswylwyr

Y Dyfodol

Mae'r Uwch Swyddogion wedi cytuno i ymgorffori'r gweithgaredd hwn yn eu cartref gofal. Byddwn yn treulio gweddill ein grant i hwyluso hyn drwy ddarparu 3 phenset arall ac ychydig mwy o fideos pwrpasol.

Nid yw ein fideos yn rhyngweithiol ond fe wnaethom dreialu fideo rhyngweithiol i weld sut groeso y byddai'n ei gael. Roedden nhw'n meddwl bod cerdded ar wely'r môr yn wych!

Mae Llywodraeth Cymru wedi ein cysylltu â grŵp technegol sy'n ymchwilio i'r defnydd o VR rhyngweithiol ac rydym wedi cytuno i gyfarfod yn fuan. Nid ydym yn ymwybodol bod unrhyw grŵp yn defnyddio unrhyw beth tebyg i'n fideos pwrpasol ac rydym yn ystyried ymestyn y defnydd ohonynt.

Mae gan y cysyniad hwn botensial gwirioneddol i'w gyflwyno'n ehangach y tu hwnt i Gaerffili. Os hoffech ddysgu mwy am y prosiect, cysylltwch â Caerffili Dros 50 yn **caerphillyoverfifty@gmail.com** neu ewch i wefan Cynghrair Pobl Hŷn Cymru (COPA): **https://www.copacharity.com/2023/05/27/virtual-reality-in-care-homes/**

CEFNOGI LLES PRESWYLWYR CARTREFI GOFAL

Mae Llywodraeth Cymru'n falch o gydweithio ag Age Cymru i gefnogi lles ac iechyd meddwl oedolion hŷn sy'n byw mewn cartrefi gofal. Mae Age Cymru'n arwain ar brosiectau a ariennir gan Lywodraeth Cymru i ymgysylltu â phreswylwyr cartrefi gofal, hyrwyddo gwirfoddoli mewn cartrefi gofal ac asesu'r cymorth iechyd meddwl sydd ar gael i bobl hŷn sy'n byw mewn cartrefi gofal.

Roeddem am gael gwell dealltwriaeth o fywydau a phrofiadau preswylwyr cartrefi gofal yn ystod pandemig Covid-19. Gweithiodd y prosiect Dweud Mwy Wrthyf/Tell Me More gyda phobl hŷn sy'n byw mewn cartrefi gofal gan ddefnyddio cyfuniad creadigol o dechnegau sgwrsio ystyrlon ac artistiaid i gynhyrchu portreadau o'r preswylwyr. Mae'r ffilm fer wedi'i hanimeiddio, a leisiwyd gan y trigolion ac sy'n defnyddio'r portreadau, yn rhannu eu barn a'u gobeithion, ac mae'n dystiolaeth bwerus iawn o'r heriau a wynebwyd ganddynt. Gallwch wylio'r ffilm Dweud Mwy Wrthyf/Tell Me More a darllen yr adroddiad yma: **https://www.ageuk.org.uk/cymru/our-work/care-homes/tell-me-more/**

Mae Age Cymru wedi adeiladu ar y dysgu ac ar lwyddiant y prosiect Dweud Mwy Wrthyf/Tell Me More dros y flwyddyn ddiwethaf drwy hyfforddi staff a gwirfoddolwyr cartrefi gofal yn y dull Dweud Mwy Wrth/Tell Me More, er mwyn annog sgyrsiau ystyrlon â'r bobl maen nhw'n gofalu amdanynt a darganfod beth sy'n bwysig iddynt. Fe wnaeth hyn ysbrydoli cartrefi gofal i greu gweithgareddau wedi'u teilwra i ddiddordebau preswylwyr a helpu i ddychwelyd i fywyd mwy normal ar ôl y pandemig.

Mae gwirfoddolwyr yn gwneud gwahaniaeth cadarnhaol mewn sawl agwedd ar fywyd ac mae ganddynt rôl werthfawr mewn cartrefi gofal. Gall eu cyfraniad gyfoethogi bywydau a phrofiadau pobl sy'n byw ac yn gweithio mewn cartrefi gofal. Mae Age Cymru'n gweithio i gynyddu ac ymwreiddio gwirfoddoli mewn cartrefi gofal ledled Cymru, gan gysylltu â sefydliadau lleol i recriwtio gwirfoddolwyr, a chefnogi a pharatoi'r gwirfoddolwyr a'r darparwyr cartrefi gofal ar gyfer y lleoliadau. Bydd yn parhau i godi proffil gwirfoddoli mewn cartrefi gofal a hyrwyddo model gwirfoddoli cynaliadwy. Yn ogystal â chefnogaeth uniongyrchol, mae Age Cymru wedi cyhoeddi **Pecyn Cymorth Gwirfoddolwyr Cartrefi Gofal** i gynorthwyo cartrefi gofal i recriwtio, hyfforddi a rheoli eu gwirfoddolwyr eu hunain.

Rydym yn awyddus i ddysgu mwy am y gwasanaethau iechyd meddwl a'r cymorth sydd ar gael i breswylwyr hŷn cartrefi gofal a phobl hŷn sy'n symud i gartrefi gofal. Cynhaliodd Age Cymru brosiect peilot yn canolbwyntio ar brofiadau pobl sy'n byw mewn cartrefi gofal mewn ardaloedd trefol a gwledig - Caerdydd a Sir Benfro - wrth gael mynediad at gymorth iechyd meddwl. Roedd y prosiect yn ystyried anghenion cymorth penodol cyn-filwyr sy'n byw mewn cartrefi gofal hefyd o ystyried eu cefndir a'u profiad bywyd. Darllenwch yr **adroddiad** yma. Bydd Age Cymru'n parhau i gasglu a lledaenu arferion da wrth gefnogi pobl pan fyddant yn symud i gartref gofal. Bydd yn cydweithio â Gofal Cymdeithasol Cymru hefyd er mwyn ystyried sut i gynnwys cymorth iechyd meddwl fel rhan o gymwysterau gweithwyr gofal.

I gael rhagor o wybodaeth am y prosiectau hyn, cysylltwch â **CareHomeTeam@llyw.cymru**

Y NEWYDDION DIWEDDARAF AM GYMRU OED-GYFEILLGAR

Oed-Gyfeillgar Sir y Fflint

Ym mis Mai, croesawyd Sir y Fflint yn ffurfiol fel aelod o Rwydwaith Byd-eang Sefydliad Iechyd y Byd ar gyfer Dinasoedd a Chymunedau Oed-Gyfeillgar. Mae hyn yn gydnabyddiaeth o'r gwaith gwych sy'n digwydd i wneud Sir y Fflint yn lle oed-gyfeillgar a'r ymrwymiad hirdymor i weithio gyda phobl hŷn ac eraill i wneud Sir y Fflint yn sir wych i bawb dyfu'n hŷn ynddi.

Mae gan Sir y Fflint nifer fach o drefi mawr, a llawer o drefi a phentrefi llai, a chymysgedd o ardaloedd diwydiannol, masnachol a gwledig. Mae hyn yn her ddiddorol o ran datblygu cymunedau oed-gyfeillgar. Roedd datblygiadau cychwynnol yn canolbwyntio ar ymgysylltu â grwpiau a sefydliadau lleol er mwyn deall blaenoriaethau i alluogi pobl i fyw yn dda wrth iddynt heneiddio. Sefydlwyd grwpiau llywio lleol i nodi cyfleoedd i fod o fudd i gymunedau ledled y sir a darparu tipyn o ddysgu cychwynnol er mwyn llywio datblygiadau parhaus oed-gyfeillgar.

Mae rhai o'r blaenoriaethau oed-gyfeillgar a nodwyd yn cynnwys:

- Gwasanaethau iechyd a lles yn enwedig mewn cymunedau gwledig
- Diogelwch pobl hŷn, pobl sy'n fwy agored i niwed yn ein cymunedau a pharch tuag atynt
- Cymorth i helpu pobl i fynd ar-lein
- Gweithgareddau, grwpiau a gwasanaethau cymdeithasol ar gyfer pobl hŷn
- Gwybodaeth am grwpiau, gweithgareddau, gwasanaethau
- Cludiant mewn cymunedau gwledig/anodd eu cyrraedd
- Hyfforddiant, gwirfoddoli, cyfleoedd cyflogaeth

Mae datblygiadau oed-gyfeillgar wedi canolbwyntio ar fynd i'r afael â'r blaenoriaethau hyn. Mae uchafbwyntiau'n cynnwys y canlynol:

Cynyddu ymwybyddiaeth a dealltwriaeth o bobl sy'n byw gyda dementia

Mae staff a disgyblion mewn ysgolion cynradd yn dysgu am ddementia ac yn cael eu hannog i wneud addewidion i ddod yn ffrind dementia (menter Cyfeillion Dementia Cymdeithas Alzheimer).

Mae nifer o ddisgyblion wedi cymryd rhan mewn prosiectau celfyddydau creadigol hefyd, ac wedi perfformio i'w teuluoedd, a phobl hŷn o'r gymuned leol. Cadarnhaodd adborth fod y prosiect wedi cynyddu hyder mewn dementia a dealltwriaeth ohono.

Helpu pobl i fynd ar-lein a chynyddu sgiliau digidol

Amlygodd pandemig Covid y manteision o fod ar-lein. Roedd y rhai a oedd wedi'u cynnwys yn ddigidol yn gallu cadw mewn cysylltiad â theulu a ffrindiau, ymuno â gweithgareddau rhithwir a siopa ar-lein. Drwy gydweithio â sefydliadau partner, Llyfrgelloedd Aura, Coleg Cambria, a thimau Tai Gwarchod, mae benthyg llechi digidol a sesiynau hyfforddi cymunedol wedi helpu'r rhai sydd am fynd ar-lein. I'r rhai sy'n llai hyderus, darperir cymorth drwy swyddfeydd Sir y Fflint yn Cysylltu a hybiau cymunedol i gael mynediad at wasanaethau ar-lein.

Cynyddu hyder pobl hŷn i ailgysylltu â'u cymunedau

Fel yr amlygwyd yn adroddiad Comisiynydd Pobl Hŷn Cymru "**Gadael neb ar ôl - camau gweithredu ar gyfer adferiad o blaid pobl hŷn**" roedd angen cymorth i helpu grwpiau a lleoliadau cymunedol i ailagor yn dilyn y pandemig. Mae llawer o grwpiau'n dibynnu ar wirfoddolwyr hŷn i drefnu gweithgareddau ac yn dilyn cyfnodau hir o warchod eu hunain, roedd hyder a symudedd wedi gostwng yn sylweddol. Fe wnaeth

Hamdden Aura helpu i fynd i'r afael â hyn drwy gynnal dosbarthiadau ymarfer corff hawdd yng nghymuned wledig yr Hôb a Chaergwrle. Roedd grantiau cymorth Covid wedi galluogi grwpiau i brynu offer a chyflenwadau hanfodol i ailgychwyn hefyd. Gweithiodd Cyngor Gwirfoddol Lleol Sir y Fflint gyda'r Gwasanaethau Cymdeithasol i recriwtio gwirfoddolwyr i ailddechrau gweithgareddau ac adeiladu cynaliadwyedd.

Codi ymwybyddiaeth o'r hyn sy'n digwydd yn y gymuned

Mae'r adborth yn cadarnhau, er bod llawer o weithgareddau a grwpiau'n digwydd yn aml mewn cymunedau, gall fod diffyg gwybodaeth am yr hyn sy'n digwydd, pryd ac ym mhle. Mae grwpiau'n cael eu cynorthwyo i ddatblygu "Digwyddiadur" sef taflenni cymunedol a rennir mewn lleoliadau cymunedol, llyfrgelloedd, canolfannau hamdden, ar hysbysfyrddau ac a gyhoeddir ar-lein. Mae gwybodaeth yn cael ei chasglu a'i rhannu gan Swyddog Heneiddio'n Dda pwrpasol y Gwasanaethau Cymdeithasol hefyd, a thrwy rwydwaith Llesiant Sir y Fflint, rhwydwaith Pobl Hŷn a rhagnodwyr cymdeithasol.

Bydd datblygu **gwefan Sir y Fflint sy'n Gyfeillgar i Oed** yn darparu canolbwynt ar gyfer rhannu arferion da oed-gyfeillgar ar hyd a lled Sir y Fflint hefyd.

Bydd llwyddiant y prosiect cyffrous hwn yn cael ei sicrhau drwy ymgysylltu'n barhaus â rhwydweithiau pobl hŷn sydd wedi hen ennill eu plwyf a thrwy gysylltiadau agos â grwpiau cymunedol, fel y Grŵp Gweithredu 50+. Mae'r tîm Heneiddio'n Dda wedi datblygu cynllun gweithredu oed-gyfeillgar Sir y Fflint er mwyn darparu dull gweithredu cydweithredol llawn ffocws i wneud Sir y Fflint yn lle gwych i fyw ynddi i bobl o bob oed.

I gael gwybod mwy, cysylltwch â thîm Ymgysylltu â Phobl Hŷn Sir y Fflint yn **opengagement@flintshire.gov.uk**

Ynys Môn yn ymuno a Rhwydwaith Byd-eang Sefydliad Iechyd y Byd o Gymunedau a Dinasoedd Oed-Gyfeillgar

Mae Ynys Môn wedi dathlu dod y sir ddiweddaraf yng Nghymru i ymuno a Rhwydwaith Byd-eang Sefydliad Iechyd y Byd o Gymunedau a Dinasoedd Oed-Gyfeillgar.

Bydd dod yn aelod o'r rhwydwaith yn nodi ymroddiad ynys-gyfan i chwalu'r rhwystrau rhag heneiddio'n dda a sicrhau statws Ynys Môn fel ynys oed-gyfeillgar.

Mae llawer o waith wedi'i wneud dros y misoedd diweddar i gefnogi'r gwaith o greu Ynys Môn Oed-Gyfeillgar, sydd wedi cynnwys:

- Ailgyflwyno **Fforymau Pobl Hŷn** wedi'i cyfnod clo a chymryd ymlaen adborth gan y gymuned i symud o fforymau mwy a chanolog i fforymau llai, fwy lleol. Ers mis Mawrth mae unarddeg Fforwm Pobl Hŷn wedi'i gynnal allan yn y gymuned ledled Ynys Môn ac wedi cael ymateb cadarnhaol dros ben
- Cynnal cyfres o **Ddiwrnodau Agored 50+** o fewn Canolfannau Hamdden y sir sy'n galluogi pobl hyn i gael mynediad at wybodaeth yn wyneb i wyneb gan amryw o wasanaethau ac elusennau, rhoi'r cynnig ar wahanol weithgareddau hamdden am ddim, a mwynhau cinio a'r cyfle i gymdeithasu
- Cynhyrchu a dosbarthu dros 2,500 o gopïau o'm **Cyfeirlyfr Cludiant Cymunedol Ynys Môn**, sydd gyda gwybodaeth ar holl gynlluniau cludiant cymunedol sydd wedi'i leoli ar yr ynys

[Cyfeirlyfr Cludiant Cymunedol Môn (llyw.cymru)]

- Cynhyrchu **Cyfeirlyfr Adeiladau Cymunedol** i gefnogi mwy o wasanaethau i fynd a'u darpariaeth i bobl hŷn allan i'r cymuned

- Trefnu nifer o sesiynau hyfforddiant **Ymwybyddiaeth Sgamiau** i bobl hŷn yn y gymuned

Mae cynlluniau i'r dyfodol yn cynnwys parhad o'r Fforymau Pobl Hŷn a lansiad Newyddlen Ynys Môn Oed-Gyfeillgar a bydd yn helpu cadw preswylwyr Ynys Môn yn wybodus am yr holl ddatblygiadau a'r gefnogaeth ar gael iddynt i heneiddio'n dda.

Nodir Cynghorydd Gwilym Jones, Pencampwr Oed-Gyfeillgar Ynys Môn:

"Ar ran Cyngor Sir Ynys Môn a'r Ynys yn ei gyfanrwydd, hoffwn ddiolch i Lywodraeth Cymru a Thîm Comisiynydd Pobl Hyn Cymru am y gefnogaeth yn ystod ein taith i fod yn aelodau o'r Rhwydwaith. Rydym yn edrych ymlaen yn fawr i adeiladu ar y berthynas bwysig hon, ac i ddatblygu cynlluniau cyffrous ar gyfer trigolion yr Ynys."

Os hoffech ddysgu mwy am waith Ynys Môn Oed-Gyfeillgar, cysylltwch â Swyddog Datblygu Cymunedau Oed-Gyfeillgar, Sioned Young ar SionedYoung@ynysmon.llyw.cymru neu 01248751 832.

EISTEDDFOD

Eisteddfod Genedlaethol: Sesiwn hawl i holi

Teitl: Cymru Oed-Gyfeillgar - Diwylliant, Chwaraeon a'r Celfyddydau

Lleoliad: Stondin Llywodraeth Cymru

Pryd: 8 Awst 2023, 15:00 - 16:00

Gwyddom am bwysigrwydd iechyd meddwl ac iechyd corfforol os ydyn ni am fyw yn iach ac i gyflawni ein llawn botensial. Mae gan y meysydd diwylliant, chwaraeon, celfyddydau rôl enfawr i'w chwarae er mwyn cyflawni hynny. Os ydym ni o ddifri ynglŷn â chyflawni ein gweledigaeth o Gymru Oed-Gyfeillgar lle mae pawb yn edrych ymlaen at fynd yn hŷn.

Yna rhaid sicrhau bod y cyfleoedd i gymryd rhan, i ymweld ag i wirfoddoli yn cwrdd â disgwyliadau a dyheadau pobl hŷn ledled Cymru.

Ar y panel bydd:

- Brian Davies, Prif Weithredwr Chwaraeon Cymru
- Lleucu Siencyn, Cyfarwyddwr Datblygu'r Celfyddydau, Cyngor Celfyddydau Cymru
- Nia Williams, Cyfarwyddwr Addysg a Rhaglenni Cyhoeddus, Amgueddfa Genedlaethol
- Aled Evans, Rheolwr, Age Cymru Gwynedd a Môn
- Rhian Gibson, Cyfarwyddwr Cyfathrebu, Ymgysylltu a Phartneriaethau, Llyfrgell Genedlaethol Cymru

Cewch gyfle i glywed am weledigaeth y siaradwyr ond hefyd y cyfle i holi eich cwestiynau. Bydd y Dirprwy Weinidog Gwasanaethau Cymdeithasol hefyd yn bresennol ac yn awyddus i drafod eich syniadau.

Edrychwn ymlaen at y sgwrs.

Diolch am ddarllen ein cylchlythyr!

AMDANOM NI

Mae'r cylchlythyr hwn yn cael ei gynhyrchu gan dîm Hawliau Pobl Hŷn Llywodraeth Cymru ac mae'n arddangos arferion da gan amrywiaeth o bartneriaid ledled Cymru.

Rhagor o wybodaeth ar y we:

Dilynwch ni ar Twitter:

@LlClechydaGofal

Ein strategaeth ar gyfer cymdeithas sy'n heneiddio

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Comisiynydd Pobl Hŷn Cymru
Older People's Commissioner for Wales

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[By Email only]

13 November 2023

Dear Helen, Sue and Graham

Making Wales an Age-friendly Nation Conference – 08 November 2023

Thank you so much for participating in the Age Friendly Conference and for your excellent presentation on the positive work underway in Flintshire. You really brought age friendly communities to life demonstrating the practical changes and impact as well as the importance of working in partnership. I know that everyone at the conference enjoyed and appreciated your contributions and insights.

I hope you enjoyed the conference and the opportunity to connect with others working to make Wales an age friendly nation.

With thanks and best wishes.

Yours sincerely

Heléna Herklots

Heléna Herklots CBE
Older People's Commissioner for Wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

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Comisiynydd Pobl Hŷn Cymru
Older People's Commissioner for Wales

Access Denied:

Older people's experiences of digital exclusion in Wales

The Older People's Commissioner for Wales

The Older People's Commissioner for Wales is an independent voice and champion for older people throughout Wales.

The Commissioner is taking action to protect older people's rights, end ageism and age discrimination, stop the abuse of older people and enable everyone to age well.

The Commissioner is working for a Wales where older people are valued, rights are upheld and no-one is left behind.

How to contact the Commissioner:

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Accessible formats

If you would like this publication in an alternative format and/or language, please contact us.

Mae'r ddogfen hon ar gael yn Gymraeg // This document is available in Welsh

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Foreword

Until relatively recently, it would have been hard to imagine just how far the digital world would extend into almost all aspects of our lives, now covering everything from making appointments, to finding information, to parking the car.

For people with digital skills this can bring a range of personal benefits, as well as wider benefits such as cost savings that can support the delivery of services. This applies to many older people, and stereotypes that older people are not interested in or are not capable of using technology are simply not true.

However, a significant number of older people in Wales – including a third of people aged 75+ – find themselves digitally excluded and increasingly face barriers when trying to access the information and services they need, something that exacerbates inequalities, including heath inequalities, and puts people's health and well-being at risk.

Older people are by no means the only group affected by digital exclusion – for example, people living with disabilities, people on low incomes, and people with long-term health also find themselves at particular risk – but given that age remains the biggest risk factor, it is crucial that older people's voices and experiences are used to understand the issues people are facing and, more importantly, the action needed to ensure people who are digitally excluded are not left behind.

That's why I invited older people throughout Wales to contact me and my team to share examples of the ways that the shift towards digital services is affecting people's lives, and the impact this is having.

Over 150 older people responded to share their experiences, and I would like to say a big thank you to everyone who got in touch for being so open and for providing such a powerful snapshot of what day-to-day life can be like for older people who are digitally excluded. A big thank you, too, to the older people who shared their experiences of digital exclusion with me and my team at engagement visits and events or contacted my Advice and Assistance Service to share information and highlight issues.

My findings highlight a stark digital divide that is not only exclusionary, but also often leaves older people feeling worthless, inadequate and that they are not valued by society. In addition, older people often struggle to find the right kinds of support to enable them to get and stay online through learning and maintaining digital skills.

Concerningly, this seems to have resulted in some older people accepting that digital exclusion is simply a part of growing older, resigned to having to live with the consequences of this due to the seemingly insurmountable barriers to getting and staying online.

This has to change, and while the work being delivered by local authorities and health boards in response to the formal Guidance I issued in 2021 is welcome, it is clear that far more needs to be done to tackle the issues and barriers shared by older people.

Without the action I am calling for, more older people will become excluded, not only unable to access the information and services they need, but also, more concerningly, finding themselves without a voice, without an opportunity to have a say on the future.

But by working together to deliver the right action and support, we can break down the barriers that lead to and reinforce digital exclusion, and help to create a healthy and inclusive Wales that enables us to age well.

Heléna Herklots CBE
Older People's Commissioner for Wales

Executive Summary

Background

The increasing use of digital technology, and the pace of change we have seen in recent years means that the ways in which we access services and information, and the ways we communicate, have changed significantly. This brings with it the potential for positive improvements and efficiencies across a range of services as technology continues to develop.

However, the changes we are seeing, which accelerated a great deal as a result of the pandemic, has left many older people who are not online struggling to access the information and services they may need.

Recognising a stark digital divide that undermines people's rights and will potentially grow wider as the shift towards digital continues, having an even greater impact on many older people's health, well-being and day-today lives, the Commissioner issued formal Guidance to local authorities and health boards.

Published in November 2021, the Guidance sets out the kinds of action needed to ensure that older people who are not online can access the information and services they need via non-digital means, and that older people who wish to get online are encouraged and supported to do so.

The Guidance was strongly welcomed by many older people and older people's groups, and responses from local authorities and health boards highlighted a variety of work and initiatives underway or planned to support older people.

However, engagement with older people throughout Wales and via the Commissioner's Advice and Assistance Service suggested that many individuals still find themselves facing significant issues when trying to access digital services or non-digital alternatives, something the Commissioner wanted to explore further given the potential impact of this on people's lives.

The Commissioner therefore invited older people to get in touch to share their experiences of digital exclusion and the impact this has on their day-to-day lives, as well as any examples of good practice making a positive difference.

From July to November 2023, a total of 159 responses were received, highlighting the experiences of older people throughout Wales. Information was also captured through engagement sessions with older people and via the Commissioner's Advice and Assistance Service.

The Commissioner also requested further information from local authorities and health boards about any further actions or measures they have put in place since 2021, as well as inviting them to share examples of good practice or highlight gaps or barriers to inclusion they have encountered.

Findings and Conclusions

The experiences shared indicate that older people who are not online or have limited digital skills often find it difficult, or in some cases impossible, to access crucial services – including healthcare services and financial services – and often find non-digital alternatives to be of poor quality and offer an inferior service.

This risks undermining people's rights and exacerbating existing inequalities, as those who are likely to need services the most, who are also more likely to be digitally excluded, may find themselves essentially prevented from accessing them.

Older people's responses highlighted that the 'digital world' often creates stress and anxiety when undertaking everyday tasks they previously found straightforward, and said it can be difficult to access the right kinds of support to overcome the barriers that lead to and reinforce digital exclusion. Older people with other protected characteristics – such as Black, Asian and Minority Ethnic older people or older people with disabilities – often also face additional barriers in terms of language and accessibility.

Concerns were also shared by older people about the difficulties they have in maintaining digital skills due to the speed at which technology changes, something that often leaves people feeling reliant on others and undermines their independence.

The rapid shift towards digital and the digital divide this has created has left many older people in Wales feeling inadequate, that they are not valued by society and that they are being left behind, affecting the ways people feel about themselves and about growing older. Many older people appeared to have 'given up' in terms of getting online or doing certain things, and had resigned themselves to facing growing exclusion as they got older.

Updates provided by local authorities and health boards indicate that a range of work is ongoing to provide non-digital services and support older people to get online, but it is clear from the experiences shared by older people that much more needs to be done to ensure that those who are not online or those with limited digital skills are not excluded and that their rights are upheld.

This must include practical action – such as promoting telephone services or making websites more accessible – as well as action at a strategic level to ensure a consistent approach to tackling digital exclusion throughout Wales.

The Welsh Government and other public bodies have a crucial role to play in delivering this, both through meeting their duties under legislation and ensuring the issue of digital exclusion is central to decision-making and service design. The private sector also has a role to play through meeting duties under the Equality Act 2010.

A failure to act will not only lead to more older people being further marginalised as more areas of life 'go online', but will also make it much harder, or even impossible, for citizens who do not use the internet to participate, have a voice and have a say on the future.

Recommendations

The Commissioner's findings, based on the experiences shared by older people living throughout Wales, have been used to develop a series of recommendations for the Welsh Government, UK Government and public bodies focused on ensuring that:

- Public bodies are meeting their duties under the Equality Act 2010 and other relevant legislation.
- Policies and strategies are delivering the action promised and that this is reflected in older people's experiences.
- Digital exclusion is central to discussions relating to the design and delivery of services.
- The voices of older people who are not online or who have limited digital skills are heard and responded to.
- Further practical action is taken to ensure the availability of non-digital information and services in community spaces, and to support older people to get and stay online if they wish to and use the internet securely and confidently.

The Commissioner is also calling for action within the private sector focused on ensuring that:

- Customers who are not online receive equivalent levels of service to those who are.
- Approaches to digitalisation fully meet regulatory guidance on protecting vulnerable customers.
- Additional support is provided to customers who are digitally excluded, or find themselves in vulnerable situations, including support with costs.

Playing her part, the Commissioner will also take a range of action to influence public bodies and support older people:

- Using the evidence within this report to make the case for change and secure commitments to take forward the action required.
- Scrutinising policy and strategy developments to ensure older people who are not online do not find themselves excluded.
- Promoting older people's rights in relation to accessing information and services under the Human Rights Act and Equality Act.
- Continuing to raise awareness of digital exclusion and its impact on people's day-to-day lives across the Welsh Government, public bodies and wider society.
- Providing support to older people experiencing digital exclusion to challenge poor practice, including via the Advice and Assistance Service.

The Commissioner will also publish an update six months after the publication of this report, which will consider progress against her recommendations and highlight the action she has delivered.

Introduction

The increasing use of digital technology means that the ways in which we access services and information, and the ways we communicate, have changed significantly in recent years. The pace of this change accelerated significantly due to the impact of the pandemic, and issues relating to digital exclusion are frequently raised with the Commissioner by older people.

Digitalisation has created barriers for older people and other groups who are not online when trying to access services and information, as well as other kinds of amenities. Being online no longer just makes life easier, it is now often essential for everyday activities. This makes the issue of digital exclusion even more serious, particularly as the right to access information is a key element of freedom of expression and is protected across several human rights instruments.

While there is no 'universally accepted definition of digital exclusion', it broadly refers to members of the population who are unable to use the internet in ways that are needed to participate fully in modern society.[1] This is reflected in the definition used by the Welsh Government in its Digital Strategy for Wales, which also considers the reasons why people may find themselves digitally excluded:

"There are some people, however, who do not, or cannot, use digital tools or online services. This can be for a number of reasons - they might have made a choice not to, they may lack motivation and / or confidence, they might not have the recognised basic digital skills, or they might not have access to (or be able to afford) devices or connectivity. This means that they are digitally excluded."

These kinds of definitions may limit the understanding of digital exclusion, however, as they can make this seem like a binary issue – i.e. that someone is either online or not online – rather than reflecting the fact that there are different levels of digital exclusion.

For example, people may choose to use the internet for certain activities, such as keeping in touch with friends or family via social media, but not others, such as banking or shopping. Similarly, it is important to remember that access is not the same as inclusion: people may be online but may still find themselves digitally excluded in some way, as highlighted by many of the quotes from older people in section / chapter X below.

Research shows that older people are most at risk of digital exclusion, while other factors – such as not working, being amongst the most financially vulnerable and living with a condition that limits or impairs the use of communications – also make it more likely an individual will be digitally excluded.[2]

This is reflected in the latest available data for Wales, which show that:

- 31% of over 75s (95,069 people) do not have access to the internet at home
- 33% of over 75s (101,200) do not use the internet (including Smart TV and handheld devices), compared to 13% of 65-74s and 0% of 25-44s.[3]

Similarly, data shows that older people are far less likely to have accomplished the 5 Basic Digital Skills (handling information and content, communicating, transacting, problem solving and being safe and legal online) in the past three months compared to other age groups, 41% of over 75s and 61% of 65-74 year olds had these skills, compared to 80% of 45-64 year olds, 88% of 25-44 year olds and 91% of 16-24 year olds.[4]

While older people who have digital skills are using the internet more than ever[5], the figures above demonstrate a stark digital divide that will potentially grow wider and have an even greater impact on many older people's health, well-being and day-today lives as the shift away from non-digital information and services continues.

Recognising this, the Commissioner used her legal powers to issue formal guidance to local authorities and health boards in Wales in November 2021, setting out the kinds of action they should be taking to ensure that people who can't (or don't wish to) get online have ways to access the information and services they need via non-digital means.[6] The guidance also set out the ways that support could be delivered to help older people to get online and use the internet safely and with confidence.

All local authorities and health boards responded to the guidance, highlighting the measures they currently had in place or planned to provide access to information by non-digital means, and to support older people to get online.[7]

Alongside publishing her guidance, the Commissioner also produced and distributed an information booklet for older people, to help people to better understand their rights to access information and services via non-digital means and provide contact details for organisations that can offer help and support if people feel their rights are not being upheld. To date, over 10,000 paper copies have been distributed via partners, older people's groups, and organisations throughout Wales.

Building on this work, this report examines the ways in which older people's day-to-day lives and experiences are being affected by digital exclusion and emerging digital barriers, to identify where further action may be needed to ensure that older people's rights to access information and services are upheld.

The report is based on responses shared by over 150 older people (in some cases with support from family or friends) to a call for evidence and examples of good practice from the Commissioner, as well as conversations during engagement session with older people's groups and information captured via the Commissioner's Advice and Assistance Service.

The powerful evidence they provided not only highlights the many, and rapidly changing, ways that digital exclusion impacts upon their lives, but also shows that people often find themselves feeling powerless, worthless and left behind.

The report also includes a summary of updates provided by local authorities and health boards requested about action and progress since 2021, which the Commissioner has also used to form her conclusions and determine her calls for action.

Legislation, Policy and Practice

As highlighted in the introduction, the right to access information is a key element of the broader right to freedom of expression and is protected across several human rights instruments, including the UN International Covenant on Civil and Political Rights, the European Convention on Human Rights, and the Human Rights Act 1998.[8]

Alongside this, the Equality Act 2010 states that providers of goods and services (e.g. shops, GPs, social services, transport services), as well as employers, must not discriminate – or offer inferior services or treatment – on the basis of a protected characteristic, such as age.[9]

The Act also includes a duty to consider the needs of people with protected characteristics, as part of wider general duties to 'advance equality of opportunity between people who share a protected characteristic and those who do not' and also to 'remove or minimise disadvantages suffered by people due to their protected characteristics'.

This means that the Act should offer protection to individuals both proactively, as public bodies and businesses fulfil their legal duties, and 'reactively' as a means to challenge instances of age discrimination. However, as case law relating to the Equality Act is still relatively limited, there are difficulties in determining the extent to which this is reflected in the reality of people's lived experiences.

Other legislation, such as the Public Sector Bodies Accessibility Regulations 2018, creates duties at a more operational level with the aim of ensuring consistent standards across digital public services in terms of accessibility, content and design.

In Wales, further responsibilities are created under the Socio-Economic Duty within the Equality Act, which was enacted by the Welsh Government in March 2021.

Furthermore, Wales also has its own specific Digital Strategy, which was published in March 2021.[10] The Strategy sets out 'a vision and ambition for a coordinated digital approach in Wales' and states a commitment to continuing to deliver alternative ways to access public services, which will be 'as good as those offered online', something restated in the Welsh Government's Strategy for an Ageing Society.[11]

However, there is still little detail on the timescales for delivering upon this commitment: within the delivery plan that accompanies the Welsh Government's Digital Strategy, this action is listed under 'later', with no indication of timescales.

If this kind of action is delayed, there is a risk that online-only options, many of which were introduced during pandemic (such as the removal of paper copies of information leaflets from community spaces) will become normalised and that even more non-digital options could be lost.

The Equality and Human Rights in Commission Wales has recognised the potential risks presented by this kind of shift towards digital services, calling on the Welsh Government to 'increase digital inclusion for those aged over 65 and ensure that services such as health and social care are accessible for those without access to the internet or digital literacy skills'.[12]

Some action has taken place, however, which aims to deliver improvements. For example, Digital Communities Wales: Digital Confidence, Health and Well-being exists to reduce digital exclusion in Wales, aiming to build a Wales where everyone has the skills, access and motivation to be a confident user of digital technology. Similarly, local authorities report a range of activity in relation to supporting older people to be online.[13]

The Centre for Digital Public Services has also developed the Digital Service Standards for Wales, which set out what's expected from new or redesigned digital services funded by Welsh public sector organisations. The Standards emphasise the importance of understanding users and their needs (Standard 3 in particular) as public services are for everyone. Likewise, there is a focus on examining the 'user journey' from start to finish, understanding the different ways people use services, whether online, over the phone or in person, based on first-hand research with users to understand their experiences.

In addition, the Welsh Government has commissioned the University of Liverpool to undertake research on developing a Minimum Digital Living Standard (MDLS), a citizen-centred definition of what counts as digital inclusion or exclusion and can be used to assess (with input from members of the public) the minimum that certain types of households need in order to take part in everyday activities, covering factors including access to devices and internet connections, as well as people's skills.

This initially focused on the needs of households with children through a series of focus groups, but expanding this to include other groups – such as older people and people living in care homes – could provide important insights into the diversity of people's needs and where particular challenges may exist, (e.g. the difficulties older people often face in developing and/or maintaining digital skills).

Developing an MDLS is also part of the Welsh Government's efforts to measure digital inclusion, as the status of this is listed as one of the Welsh Government's 50 current National Indicators as part of the Well-being of Future Generations Act. According to the 'National Indicator technical descriptions and data links', a technical measurement for this indicator is still under development, alongside the development of the MDLS.[14]

While this kind of work is to be welcomed, it is important that policy- and decision-makers also fully understand the needs of people, including older people, who are not online and who will not be online in the future, so that services and information remain accessible. Digital exclusion is not an issue that can be resolved by simply trying to get everyone to use the internet and solely concentrating efforts on activities around this.

Methodology

The formal Guidance the Commissioner issued in November 2021 was strongly welcomed by many older people and older people's groups, and the responses from local authorities and health boards highlighted a variety of work and initiatives underway or planned to ensure people could access information and services via non-digital means.

However, engagement with older people throughout Wales and via the Commissioner's Advice and Assistance Service suggested that many older people still found themselves facing significant issues when trying to access digital services or non-digital alternatives, something the Commissioner wanted to explore further given the potential impact of this on people's lives.

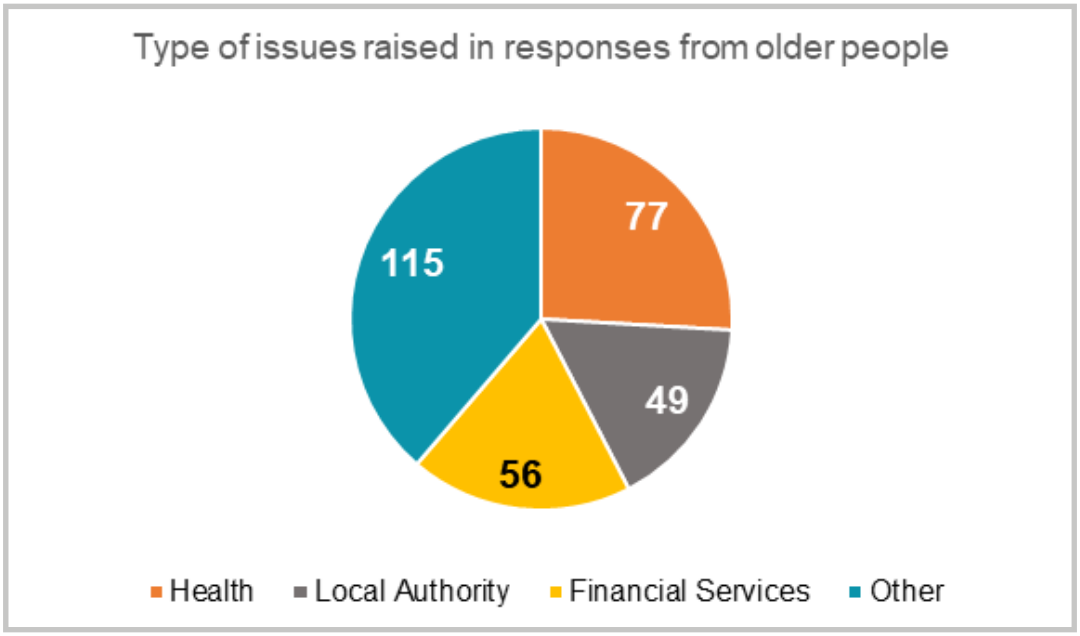
The Commissioner therefore invited older people to get in touch to share their experiences of digital exclusion and the impact this has on their day-to-day lives, as well as any examples of good practice making a positive difference.

Older people could share their experiences by telephoning the Commissioner's office, or by completing a paper or online form, and adverts were placed in newspapers throughout Wales to encourage people to respond. The Commissioner also worked with national and local partners and organisations to reach out to older people throughout Wales, as well as using social media channels to target family and friends.

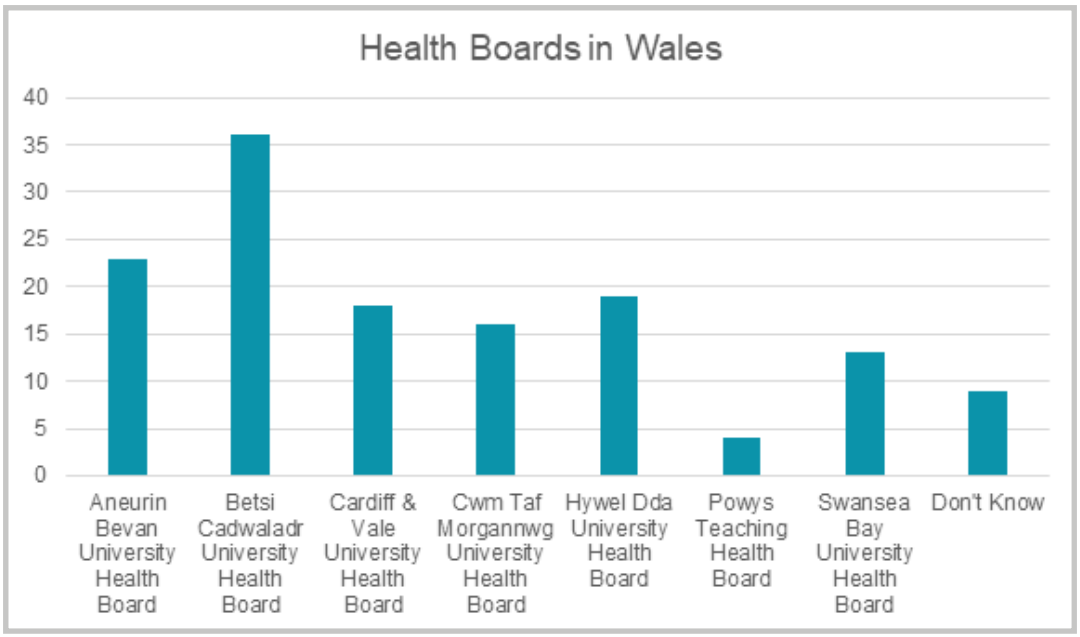
A simple framework was used to capture people's voices experiences, based around three questions:

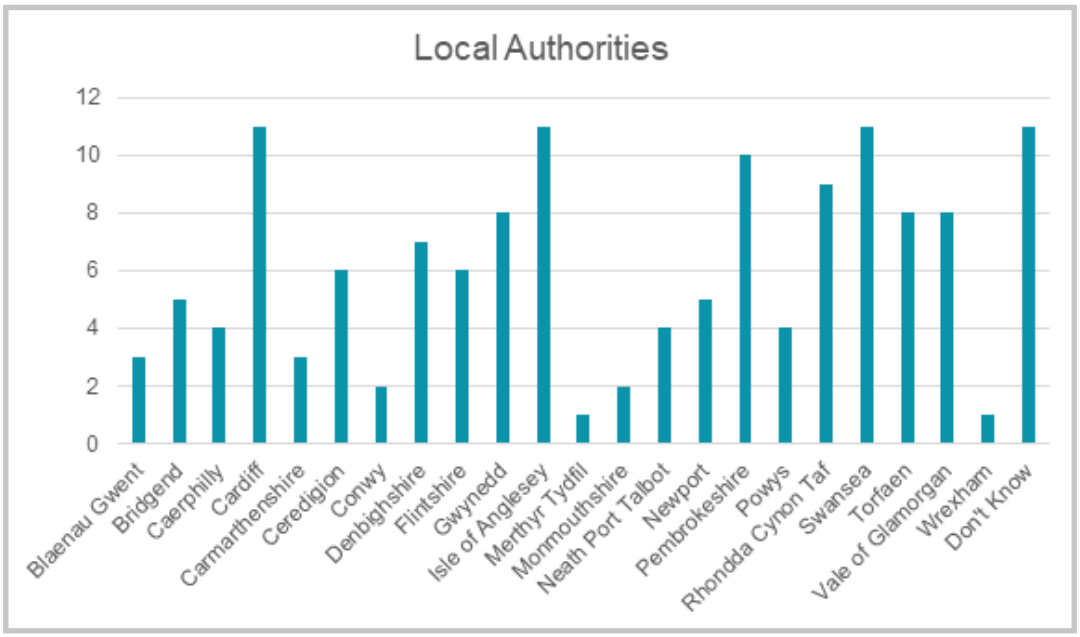
- What were your experiences?
- What impact did this have and how did this make you feel?
- What needs to happen to prevent others experiencing this kind of thing in the future?

A wide range of examples of digital exclusion and related barriers were shared, most commonly relating to health and local authority services, but also covering other issues, such as access to financial services, as highlighted in the figure below.



From July to November 2023, a total of 159 responses were received, highlighting the experiences of older people living throughout Wales. The vast majority of responses were written / sent by older people themselves, although in a small number of cases someone else provided a response on behalf of an older person.





Alongside encouraging older people to share their experiences, the Commissioner also requested further information from local authorities and health boards about any further actions or measures they have put in place since 2021, as well as inviting them to share examples of good practice or highlight gaps or barriers to inclusion they have encountered. A summary of these updates is included below.

Older people's views and experiences:

Access to information and services

This section is based on quotes from older people who responded to the Commissioner's invitation to share their experiences of digital exclusion and the impact this has on their lives.

The responses received covered a wide variety of topics, including access to services (such as financial services, health services and services provided by local authorities), cost barriers, digital skills, assumptions that everyone is online and difficulties in terms of the design and accessibility of websites and user interfaces.

The breadth of experiences shared demonstrates that digital exclusion affects older people's lives in many different ways, creating barriers – or in some cases making it impossible – for people to access the information and services they need and do the things that matter to them. This often leads to disengagement and withdrawal and put's people's health and well-being at risk.

Financial services

The shift to online banking, which has resulted in the closure of bank branches in communities throughout Wales, was a significant issue for many of the older people who responded, reflecting the wider trend of other local services closing, being amalgamated or moving further away, which makes it much harder to undertake routine activities.

Many older people told us they do not feel comfortable banking online, or do not have the devices required to do so, and rely instead on telephone banking to avoid having to make long, difficult journeys – often more than 10 miles – to visit their nearest branch, something that is often mentally and physically draining.

> **'I am terrified of doing online banking.'**

> **'Dyslexic, and terrified of doing online banking. Lloyds Bank has closed in Pwllheli, and everything has to be done over the phone.'**

Despite the importance of these services for many customers, the experiences shared were often negative, with older people reporting issues that often make it time-consuming and more difficult to carry out the transactions they need to.

> **'We resort to phoning and waiting and listening through the 'go on-line' messages. When a human being answers we run the gauntlet of security questions in order to verify my identity. They ask her for her card number, she gets flustered and upset because she cannot read the numbers - and so on. It takes forever, she feels exhausted and humiliated. She still gets asked for an email address - despite the fact that they are supposed to know of her circumstances.'**

Some older people shared that they were unable to hear the messages over the phone, and needed the help of family and friends in order to bank successfully, while others highlighted long delays when using offline services, including one individual who had to wait three weeks to set up a bank card.

Another older person said they were unable to bank online, but also felt nervous using an ATM, yet had been told by bank staff that they were unable to withdraw cash from the branch itself.

These kinds of issues – where being offline meant people were simply unable to do the things they needed to – also affected people more widely.

> **'I have found out that *large retail store* refuse your application for a credit card, even if you have held one without issue for decades. When challenged that they were severing links with good customers, they agreed and said they would live with it! No alternative method of ID verification was offered, despite the fact that companies like PayPal can provide the same service via a landline. Some banks do provide an alternative – a card reader – but this involves having an online Bank Account, something which many, especially of the older generation, prefer not to have.'**

‘Pension company was only dealing with people online. This lady had to wait a year for a lump sum from her pension and she had to pay a financial advisor to get this money for her.’

‘*Utility company* insists on sending our bill by email. We are not on the internet and we keep telling them. We did have a computer but it broke and we never replaced.’

The older person who shared this example said that having their request for an alternative bill format repeatedly ignored created stress and anxiety, and it is difficult to see why such a request could not be accommodated.

Issues and challenges accessing financial and similar services were not confined to people who were not online: even those with digital skills faced difficulties due to changes in technology or poor design.

‘Recently my bank has introduced facial recognition as an extra layer of security, in addition to fingerprint security. Try as I might, and I have tried countless times I cannot get the facial recognition to acknowledge that it is me. As a result I am excluded from making payments via bank transfer, often necessitating a trip to a an ATM to withdraw cash to pay the bill. This is very inconvenient and involves a special trip of six miles or so. I acknowledge the bank’s concern for security, but I believe that I am especially conscious of security without this inconvenience.’

‘I am 76 years of age and I am happy with the use of my iPad for many uses like banking etc, and find it useful, but the increasing necessity for smart phones does create a barrier for some which can be stressful.’

Health services

Access to health services, particularly GP services, plays an important role in supporting many older people to remain healthy and independent. Yet many older people told us that the use of digital services had created significant barriers for those who are digitally excluded, often leaving people feeling angry, frustrated and that they were receiving an inferior, potentially discriminatory service.

> **'No appointments - when told to phone at 8.45 all appointments gone. Have to phone GP - they phone back. Can't walk into the Surgery. Not able to use the computer.'**

> **'Need to phone asap after 8am you find you are approx. 30 in queue, this is because people can book online on the previous evening, also all appointments are filled by 9.15am.'**

Concerningly, responses from some older people suggested that some surgeries are offering no alternative but to use an online system.

> **'Called at my doctor's surgery to make an appointment and was informed appointments could not be made except "online". I explained I didn't and could not use a computer and asked what to do, and the receptionist repeated appointment to be done ONLINE. I asked her what could I do and was told again ONLINE ONLY. I left very upset.'**

> **'It is impossible to get a GP appointment as they have all gone first thing in the morning, and as it has to be done online. If you are ill the last thing you want to do is get up at 7.30am to log on to a computer to book an appointment, however if you do not then you do not get an appointment. I have witnessed MANY older people asking the receptionist at [the surgery] how to get an appointment and they are very sternly and rudely told to go online or get someone to help them go online, as there is no other way! This is causing a great deal of anger towards the practice.'**

Some older people also shared that they felt that not being online was resulting in them having to wait longer for treatment, either due to difficulties booking appointments, as highlighted above, or because appointments being offered were not suitable.

> **'Hospital appointment wants me to fill in a questionnaire online but because I didn't have a computer I've gone lower down on their list.'**

It should be noted that there is no NHS policy to deprioritise people who are not online or who are not digitally confident. However, older people's experiences and the concerns they shared suggest that there may be a perception that this is the case.

In some cases, older people were offered virtual appointments in order to be seen more quickly, which left them feeling upset as they felt this type of appointment was not felt to be appropriate, or impossible to attend for someone without access to a computer. This had led some individuals to arrange private appointments at their own (often significant) expense, an option that is simply not feasible for most people.

Access to online support and entitlements

Access to financial entitlements and other forms of support, such as Blue Badges, can be important as we get older to enable us to remain independent and do the things that matter to us, crucial to support us to age well.

However, the shift to digital within our public services appears to have not sufficiently accounted for the fact that the individuals most likely to need to access support or financial entitlements, in many cases older people, are also more likely to be digitally excluded, making it difficult, if not impossible, for them to find the information they need or make applications online.

One response, sent by a library worker on behalf of older people, said that they and their colleagues had dealt with hundreds of cases of older people needing assistance with digital services such as applying for a Blue Badge, Concessionary Bus Pass and financial entitlements. They said that people are often 'desperate' and come to them feeling angry and frustrated due to failed attempts to speak to someone on the phone. They shared a recent example of an older man who was trying to renew his Blue Badge.

> **'He'd tried ringing our local council (Bridgend) and after numerous attempts to get through, someone eventually answered the phone. They told him to take a photo and one form of ID to a library. This he did. However, we needed much more information than this to proceed with his application. I tried to ring the council and waited 30 mins on the line for someone to answer. Nobody did. This was 2.30 on a Friday afternoon. We had to send the man away with a list of all the information he'd need to give us to enable us to apply on his behalf. Suffice to say, he was understandably disappointed. I could give so many more examples of this type of treatment.'**

This kind of experience was reflected in other responses, which suggested that the realities of providing information or making applications via non-digital means had not been considered by those designing systems, and that it often felt impossible to find help over the phone.

> **'M is registered disabled. She has a blue badge which has now expired. I rang the council to sort out a renewal, listened to the 'go on-line' messages, spoke to a human being who asked me to upload the entire set of documents we sent out when she originally applied for the badge. There was an option to post copies (presumably we all have photocopiers?) or physically take them to the office - 5 miles away.'**

> **'Wouldn't know who to talk to get information nowadays. Can't find telephone numbers, excluded. Feels stuck because getting information on transport is harder, and access to councillors is more difficult. Feels she cannot get help anymore, and incredibly expensive to get accessible aid.'**

> **'My wife and I are both 85. We have no extended family. The use of computers has made us feel illiterate. What annoys me is a lot of companies no longer put a phone number down. This should be mandatory and the Commissioner should fight for this. We are anxious of becoming ill.'**

Parking

One area that illustrates the increasing role digital technology plays in every aspect of our lives is car parking, where digital payments and the use of parking apps are becoming increasingly common.

Many older people who got in touch with the Commissioner highlighted barriers created by issues relating to parking and the fact that a growing number of car parks / spaces no longer accept cash payments. This meant people often found it more difficult to do the things they needed to, or were put off getting out and about altogether.

> **'It makes life much more complicated than it needs to be… we have to use car parks further away than we would like, which don't use smartphone apps only.'**
>
> **'We don't go anywhere in the car where we can't pay for parking by cash.'**
>
> **'Where I have failed to obtain a parking ticket to place on the car windscreen, I have to abandon my day out.'**

Examples of older people with digital skills experiencing similar difficulties were also shared, often relating to problems accessing or using parking apps themselves, or concerns about security or making online payments.

> **'[I was] unable to download an "app" required to pay for parking at Holyhead.'**
>
> **'Parking is a nightmare where I live, the online payment system is terrible on many days it takes 5/6 attempts to make the programme work and pay for parking.'**
>
> **Trying to pay for parking in Haverfordwest, card declined because of *Parking Company*, they are known to Barclays as a bad company and used by the council, it was the only way to pay.'**

Concerns about how the continuing shift towards digital payments for parking could affect people and make their lives more difficult in the future were also shared by a small number of older people.

> **'Parking in King St Car Park noticed drivers using smart phones and apps, which I don't have. Luckily it still took coins. If that facility is taken away, many like us will stop going to Mold with bad consequences for local businesses.'**

Similarly, another older person we spoke to had been told that a mobile app was needed to pay for parking in Ceredigion and was particularly worried about what this would mean for her as she is visually impaired and has no smartphone.

Barriers that lead to and reinforce digital exclusion

Older people shared a range of reasons why they were not online. In some cases, this was a choice, but, more commonly, people found themselves digitally excluded due to limited digital skills, cost barriers, concerns about security and the changing nature of technology.

The responses below also reveal that these barriers often leave older people feeling left behind or as though they have failed in some way, that they have little control over their lives, and that their needs and rights do not matter.

Digital skills

As highlighted above, older people are far less likely to have accomplished the 5 Basic Digital Skills (handling information and content, communicating, transacting, problem solving and being safe and legal online) in the past three months compared with other age groups and may also find it difficult to maintain these skills, particularly after leaving the workplace. This can make it difficult to keep up to date with new technological developments or get help with common problems.

A significant number of older people (around 7% of people aged 75+) are also 'lapsed users', individuals who have not used the internet during the past three months, despite having done so previously. Given the pace of change within the digital world, these individuals may find their digital skills quickly becoming out of date.

These kinds of issues and barriers were highlighted by several older people, who said they felt as though they were increasingly excluded from a range of services and activities due to the rapidly changing nature of technology, and that they often found it difficult to adapt to new technology.

> **'Systems are progressively changing adapting to technology to benefit their organisation. This transference is not to the advantage of the older generation some of whom are not tech savvy and find it difficult to navigate their day with these systems in place. Especially difficult for me is the use of smart phones which I choose not to own and which are necessary for many functions.'**

> **'I am in my 70's and do feel I am increasingly excluded from things because I do not have a Smartphone. How does one choose what type of Smartphone? Understanding the memory capacity of the phone in relation to Apps. Security matters when using it. Where to get training in using it. We don't all have knowledgeable younger family members/friends.'**

Several older people shared this view, saying that more opportunities to learn digital skills, with the right types of support, would be very beneficial.

> **'I have a mobile and internet but don't know how the internet works. There should be someone available to teach us.'**

> **'I am confused with information given - need face to face.'**

The way we access services and activities has changed so quickly and significantly that it can be hard for some older people to adapt to new ways of doing things and keeping track of new forms of information, such as remembering several online passwords. This can create stress and anxiety, which can act as a further barrier to people getting or staying online, and created other difficulties.

> **'Just remember the password. Needing a mobile phone that is tricky to get things right.'**

> **'This lady wanted us to know that because she had forgotten her PIN she was unable to get her money out of [high street building society]. Neither her or her husband are using the internet.'**

Cost

Around 1 in 5 older people in Wales lives in poverty, and many more have been particularly badly affected by the cost-of-living crisis. This has forced many older people to look at their spending habits and consider ways in which they could save money.

It is perhaps unsurprising, then, that cost was one of the most common reasons given as to why people are not online, both in terms of the cost of purchasing technology itself, and ongoing costs such as broadband or mobile data. This was a particular issue for people with limited pension income, who were often unable afford these kinds of contracts.

> **'May not be able to afford the required, and mostly expensive digital equipment.'**
>
> **'Told to 'go online' and 'get the app'. BUT I did not have a smartphone. Now I have, I put £10 on it but data in background took ALL the money. I would also add that the tech is expensive and on a pension I simply find 'contracts' beyond my means.'**
>
> **'In this day and age where people are trying to cut costs, why should it be a necessity to pay for mobile data, in case you need to pay for parking. Linking a payment card to a phone horrified many old and young. People are frightened of being scammed and losing all their money.'**

Older people's responses also highlighted that cost barriers could also actually result in higher costs, whether due to more expensive pay-as-you-go mobile costs, or due to having no option but to use large amounts of credit waiting on the phone for help and support if they are unable to access online services.

> **'Pay-as-you-go is also expensive if the credit is being used up in the background before I have even connected to Wi-Fi or used the phone or texts. Furthermore, I don't actually have any family or friends to contact so what is point of bundles of so many texts/calls?'**
>
> **'I'm on pay as you go, so my credit does not last long and I have to ring (the GP) before 8.00 a.m. I am 81 years old. When I am in a queue my credit is used up.'**
>
> **'Since not online: Spending hours getting through to Utility Companies - sometimes being cut-off. Being passed from pillar to post.'**

Research also shows that alongside these kinds of costs, older people who are digitally excluded are missing out on significant savings by being unable to purchase products and services online. It was reported that home insurance could cost up to 46% more when purchased offline, while a 'SIM only' phone contract could cost £192 more.[15]

Choosing not to be online

For some older people, not being online is a choice – which was reflected in some of the responses shared with the Commissioner.

People told us they were happy using a landline or receiving bills via the post, for example, and simply had no desire to be online, with the costs and complications they felt this could bring. This often led to people feeling like they were being treated unfairly, and that their lives were being made more difficult.

> **'I refuse to have a smartphone. I get my son to sort out the gas and electricity bills. Everything is online and this is restrictive.'**
>
> **'At last, someone is recognizing the discrimination against older people without smart 'phones. I am 87 and I don't want one. There are so many things now that cannot be accessed without one.'**
>
> **'Don't use the computer. OK with medical appointments, but his hobby is football and he can't go on-line to see the fixtures.'**
>
> **'No computer or smart phone. Banks wants me to go paperless. Hospital appointment wants me to fill in a questionnaire online… No longer have yellow pages to find numbers - you must get online for finding a chiropodist etc.'**

These examples illustrate the extensive reach the digital world now has throughout many aspects of our lives – from health appointments to paying bills to engaging in our hobbies – and how the choice to not be online, or use certain technology, can create significant barriers and make what were once 'simple' things much harder.

Concerns about security

Online security is an issue that affects the whole of society, and media stories about the potential risks of using the internet are common. It is perhaps unsurprising, then, that concerns about online security are common amongst older people, and often act as a barrier to accessing digital information and services.

Some older people shared that online security is causing them a great deal of anxiety, who spoke about mistrusting the internet and the 'virtual world'. Older people said they had concerns that scams and phishing had increased, and that they felt safer not using the internet.

> **'It is safer and less worrying not to use virtual at all and many have no idea of how internet security is applied or how you confirm that a website is to be trusted and that is something that is often missing in the training and design of services.'**
>
> **'I always want to avoid the internet. If around, have to ask family members to do things for me. Feel useless I can't always remember all the instructions. Scams - scared of the knowledge available to anyone.'**

Alongside these kinds of concerns, which often deter people from being online, other aspects of online security, such as managing passwords or remembering pin codes, can also act as a barrier, preventing some older people, particularly individuals living with cognitive impairments, from successfully using the internet even if they want to.

Poor design and accessibility

The design and accessibility of websites, apps and other digital services plays a crucial role in defining our experiences online and enabling us to easily access what we need, when we need it. However, poorly designed, inaccessible content often acts as a barrier, particularly for people living with sensory loss or other conditions who may rely on assistive technologies.

Older people shared that while they wanted to be online, they often found websites inaccessible and difficult to use.

> **'Lots of websites not accessible without screen readers so have to get daughter to help or call but when I call nobody is there is to answer lots of the time.'**

> **'Website design and functionality is poor, not intuitive and the typeface and use of images, tick boxes is poorly designed and user testing seems to have been ignored; Size of devices being used and too much included on screens.'**

> **'In my experience there needs to be different platform options for online forms, e.g. phone or laptop / iPad, as if it is intended to be completed online but you are trying to on your phone (as this is often the only device people have) then it is really difficult to see all the information on the small screen.'**

These issues and barriers were felt even more strongly by older people living with certain health conditions – including sight loss, hearing loss, arthritis, Parkinson's disease and Alzheimer's – which made using websites, making appointments or reading correspondence even more difficult.

> **'My mother, late 80's, hard of hearing, not very mobile, husband with Alzheimer's. So a very vulnerable person anyway, and never used internet (or computers in any sense), unable to grasp even mobile phone technology.'**

> **'Mum is 82 with Parkinson's, doctors appointments over phone, can't remember what was said, now can't even use a mobile phone. She lives in Wales and all services are either phone or Internet related and even though my mum has a diploma in computer studies some years ago now those basic tasks are impossible.'**

> **'I have problems with my sight and severe rheumatoid arthritis in my hands and fingers. Using a mobile phone is almost impossible for me.'**

Older people also shared that certain websites 'time out' too quickly when they attempt to enter information, not only leaving people unable to access the services they need or want to, but also leaving people feeling that they are too slow, or lack the necessary digital skills.

‘The link for my GP surgery is a nightmare. Doesn’t give you time to answer the questions or the screen just disappeared.’

‘House bound and disabled. Time out when ordering food online. Can’t book appointments.’

These examples also highlight how an inability to access online services without help and support can leave older people feeling that they have lost independence and autonomy.

Language

In addition to the potential difficulties of navigating life in an increasingly digital world, Black, Asian and Minority Ethnic older people often face additional barriers due to language when trying to access information and services online, as highlighted in a small number of responses.

‘I work as Service manager for Syrian and Afghan refugees who have settled in the North Wales area since 2016. In addition to the obvious barrier of the digital challenge – especially for those who come from less developed countries, there is also the language barrier. In addition a significant number of this population are also illiterate in their first language, making the digital exclusion even more significant. This results in a long term dependence on services such as the British Red Cross for everything from making GP appointments, booking and paying for anything at school using PayPal, or completing simple forms using a word document. I have observed even those who are well educated and literate in their first language struggle to complete a basic form because they are unfamiliar with keypad strikes such as ‘delete’.’

‘Booking appointments for older parents / relatives who cannot speak English / Welsh. This has been difficult for the individual (lack of independence / autonomy), as well as for me (sometimes not being allowed to help with follow up etc. because I am not the named person). Availability of translation also varies - sometimes people don’t turn up even when booked.’

Impact on older people's day-to-day lives

As highlighted above, the Commissioner was keen to examine the impact of digital upon older people's lives, not only in terms of access to services and barriers to getting online, but also in terms of how this makes people feel about themselves and about growing older.

For some older people, digital exclusion was clearly having a significant impact on their health and well-being, with some individuals sharing that the issues and barriers they face leave them feeling inadequate, that they are not valued by society and that they are being left behind.

> **'Depression, loneliness, and humiliation, to name but three. We are being abandoned and no one gives a damn for those who cannot cope with the scope and speed of the changes. We hear a lot about choice, and in the market place, it seems to be the road to success for business, but convenience for the profiteers, means misery for a large part of our society.'**
>
> **'Don't feel valued as an older person. Just don't understand technology. Frustrated and fed up.'**
>
> **'Old! Older. Inadequate. Invisible. Frustrated.'**
>
> **'Makes me feel frustrated and feel let down.'**

For others, not being online left them feeling excluded and unable to do the things that matter to them, something that can lead to feelings of loneliness and isolation, and related issues.[16]

> **'I am in my 70's and do feel I am increasingly excluded from things because I do not have a Smartphone. For example I can no longer attend matches/events at the Stadium in Cardiff which insists on tickets on a Smartphone only.'**
>
> **'Does not use a computer or e-mail address. Difficulty in buying tickets for an event (online). Unable to make investments - online. Also, missing out on good deals because of the inability to go online. Difficulty in buying a car without being online. Video consultations with Doctor is difficult. Difficulty with online shopping. Difficulty with parking app.'**
>
> **'I find competitions in magazines that I would like to try but it's all on-line'.**

For some older people, these kinds of barriers meant they had to rely on help and support to get online, something they were often reluctant to do as it left them feeling dependent and reliant on others.

> **'I hate having to rely on other people.'**
>
> **'For my husband, it impacts on his sense of wellbeing having to rely on me.'**
>
> **'If around, have to ask family members to do things for me. Feel useless I can't always remember all the instructions.'**

Improvements suggested by older people

As well as inviting older people to talk about the impact that digital exclusion has on their lives, the Commissioner also wanted to hear from older people about practical solutions that would help to tackle the issues they experienced.

Many of the suggestions shared by older people emphasised the importance of choice and not forcing people to do things online, highlighting that effective non-digital alternatives are still crucial.

> **'NHS/ Social Care – everyone should be asked as standard what their preference is in how they are contacted. This should be the only means of contact to save confusion. Telephone contacts – all companies should be made to have a telephone number with a person on the end to contact. My Parents could not use a chat function.'**

> **'Offer paper form when people phone and ask for them, or provide support to fill in forms. Such as: tablets, training or offer to come to property and support.'**

> **'There shouldn't be an absolute reliance on smartphones. Cash or cards should be available to use at car parks.'**

Older people also made suggestions about how access to online information and services could be improved, through improving the simplicity and accessibility of websites and making digital skills training available to more older people.

> **'Better testing of websites to make them more accessible, also need better screen reader accessibility testing of websites.'**

> **'Have a much simpler website – it's not even easy to find local library site!'**

Some people wanted lessons or training, to give them the digital skills needed to use technology.

> **'Desires lessons to go online, wants computing classes. Local library offered classes but is no longer available.'**

> **'Investment, training, empathy, staffing. You'll all be old one day and even if you are digitally literate now aging process can take that away.'**

> **'Computer training. Giving people a choice.'**

Summary of responses from local authorities and health boards

As part of the current work, local authorities and health boards were asked to provide an update on any further actions or measures that they have put in place since the Commissioner published her Guidance in 2021. Some of the main points are outlined below.[17]

Accessing information and services by non-digital means

Local authorities and health boards reported continuing efforts to assist older people to access information and services via non-digital means in various ways, many of which are similar to those previously outlined in the Commissioner's earlier work on digital exclusion.

Examples shared by local authorities include:

- Providing printed copies of information through libraries or by Community Single Point of Access (SPOA) based within Councils.
- Providing Age Friendly bulletins in some areas.
- Using Community Hubs to disseminate services and information.
- Holding groups, forums and information sessions in the community to raise awareness, including sessions on online fraud and scams.
- Delivering training for staff to improve support for older people when accessing information and services.

Examples shared by health boards include:

- Producing newsletters, letters and information leaflets, some of which were in large print.
- Enabling patients to request GP appointments via telephone or face-to-face.
- Using volunteers within hospital sites to help signpost patients to services.
- Using paper copies of questionnaires to obtain feedback from patients.

One particularly interesting example shared by one health board is the development of a hybrid 'print and post' service, which aims to improve how correspondence is received by patients and will include safeguards to ensure that people who do not have the means to engage digitally are not excluded. The system will include preferences to enable opt-in / opt-out but also to cover the Welsh Language (Wales) Measure 2011 and the Equality Act 2010. Where a digital letter has been sent to a patient and it has not been read, the new system will automatically then print and post the letter to ensure delivery.

Enabling and supporting older people to get online

As above, much of the activity reported in updates from local authorities and health boards builds upon the information provided in September 2022 in response to the Commissioner's formal Guidance, and examples of ongoing activities include device loan and gifting schemes, support via libraries and community hubs, training for staff to provide support (e.g. with Blue Badge applications) and surveys to assess local needs and barriers.

Other examples shared by local authorities include:

- Working with partners (including Community Connectors and Men's Sheds) to promote digital skills.
- Improving website design / accessibility.
- Linking older people living in care homes up with members of youth groups to provide intergenerational digital learning sessions.
- Distributing the 'Icon Booklet'[18] to hubs and libraries to provide information about some of the most commonly used apps available to smartphone users.

Other examples share by health boards include:

- Creating designated roles and responsibilities to assist people to get online.
- Providing IT equipment to enable older people to attend virtual appointments.
- Using the Health Education and Improvement Wales (HEIW) Digital Capability Framework[19] to empower staff to develop their digital skills, which will, in turn enable them to support patients.
- Developing packages of support focused on raising the digital literacy and digital health literacy skills of the population.
- Considering digital exclusion and the potential barriers older people may face as part of the development of the NHS Wales App.

Other issues and future challenges

Older people raised a wide variety of digital exclusion issues in our call for information, but the scope of those discussed with the Commissioner has been even broader. For example, there are increasing concerns about public transport and the difficulty of accessing bus timetables in particular.

Similarly concerns have been shared about how the rise in the number of public consultations that are online-only risks losing the voice of older people who do not use the internet. This means people cannot have their say or input their ideas, leading to further marginalisation and ultimately poorer service design.

Another significant issue on the horizon, which will affect large numbers of older people, is the Voice over Internet Protocol (VoIP), currently being rolled out across the UK. The technology that is currently being used to make landline phone calls is being upgraded over the next few years. This means that the use of landlines in their current analogue form is due to end in December 2025.

In the future, landline calls will be delivered over digital technology, called Voice over Internet Protocol (VoIP). Customers who want to keep a landline phone will need to move to a VoIP service.

Communication about this change has been inconsistent, leading to concerns that landlines will not be available at all in the future, and that certain devices – such as care alarms, health pendants or security systems will cease to function and need to be reconfigured or replaced. This was reflected by some of the older people who shared their experiences as part of this report.

In order to ensure that older people can continue to be able to access services and information without being online, uninterrupted access to the telephone network is essential. Telecoms providers need to ensure that this is the case.

As digital technology continues to develop, the potential for positive improvements and efficiencies to services remains high. However, it is vital that all such developments take account of the needs of people, including older people, who are not online from the outset. Access to good quality information and services must not be restricted to only those people with high levels of digital skills and devices such as smartphones.

Conclusions

The experiences shared by older people demonstrate that digital exclusion negatively affects people's everyday lives in a wide range of ways, as illustrated so powerfully by the quotes above.

As the world has become increasingly digital, many older people have found themselves feeling excluded and left behind, and facing stress and anxiety when undertaking everyday tasks they previously found straightforward.

Poor quality offline alternatives mean that older people who are not online are finding it increasingly difficult, if not impossible, to access the information and services they need, including health services, which is particularly concerning. This risks exacerbating existing inequalities, as those who are likely to need services the most, who are also more likely to be digitally excluded, may find themselves essentially prevented from accessing them.

Older people told us they felt there was not enough support available to overcome the barriers that lead to and reinforce digital exclusion, such as skills or cost barriers, and that maintaining digital skills can be particularly challenging due to the speed at which technology changes. This often leaves older people feeling reliant on others, which undermines their confidence and independence.

The action being taken in response to the Commissioner's Guidance by local authorities and health boards to make information and services available offline and support people to get online is welcome.

However, it is clear from the experiences shared that much more needs to be done to ensure that older people who are not online or those with limited digital skills are not excluded and that their rights are upheld.

This includes practical actions – such as promoting telephone services or making websites more accessible – as well as action at a strategic level to ensure a consistent approach throughout Wales (see Recommendations section below)

The Welsh Government and other public bodies have a crucial role to play in ensuring that increasing digitalisation does not lead to older people being socially excluded and not feeling part of society. This means organisations must meet their legal obligations as well as work together to ensure that the needs of people who are digitally excluded are central to decision-making and service design, so that everyone can play a full part in society, whether they have digital skills or not.

While responsibilities differ in the private sector, businesses do have duties under the Equality Act 2010 and need to make sure that they do not discriminate against older customers.

The consequences of not taking action to tackle digital exclusion are severe and wide ranging. It will lead to ever greater numbers of older people and other groups who do not use the internet

being further marginalised as digitalisation affects more and more areas of everyday life. This will not only have an impact in terms of access to information and services, but also make it much harder, or even impossible for citizens who do not use the internet to participate, have a voice and have a say on the future, something that will leave us poorer as a nation in so many ways.

In order to achieve a healthy and inclusive Wales, one where we can all age well, and one which meets the Welsh Government's vision of an age-friendly Wales, action is needed to tackle digital exclusion as a matter of urgency.

Recommendations

The responsibility for ensuring that older people are able to access information and services without having to be online lies with a number of stakeholders.

Recommendations for action from individual agencies are set out further below.

The Welsh Government

Short term

- Write to all bodies that it funds reminding them of the Welsh Government's expectations in relation to digital inclusion and provision of information and services offline, as well as their obligations under the Equality Act, Human Rights Act and other relevant legislation.
- Use its own engagement with citizens across Wales as an opportunity to demonstrate good practice in relation to digital inclusion, for example by ensuring phone numbers are clearly displayed on webpages, consultations are available for response via non-digital methods, and providing hard copy information where relevant.
- Finalise the development of the measurement for the 'Status of digital inclusion' National Indicator of the Well-being of Future Generations Act, and report against the measurement in the Wellbeing of Wales, 2024 report. The measurement should enable data to be broken down by 5-10 year age bands in order to assess progress on digital inclusion among different age groups.
- Use its influence when meeting with banks, utility companies and other similar organisations to promote the need for further action on digital exclusion and for these organisations to ensure that they are taking all possible steps to ensure customer choice in the way that information and services are provided, with offline services being provided to the same standard as online.
- Ensure that there is sufficient funding and investment in non-digital services such as phone lines and provision of hard copy information in order to ensure that everyone can access information and services.
- Provide the necessary funding to organisations to enable to the delivery of training and support to older people to combat digital exclusion.

Medium term

- In order to promote consistency, develop and publish guidance on digital inclusion in relation to the provision of information and services which applies to all bodies that it funds. This should clarify expectations in relation to supporting people who are not online.
- Embed a right to digital inclusion, as well as a right to access information and services by non-digital means, into its development of a possible Human Rights (Wales) Act.

- Publish detailed plans on how it intends to deliver on the 'Digital inclusion' section of the Digital strategy for Wales: delivery plan which states that the Welsh Government will 'work with all sectors to ensure alternative options for engaging are available for everyone and designed to the same standard as those expected of digital'.
- Use the opportunities presented by the Social Partnership and Public Procurement (Wales) Act 2023 to promote socially responsible procurement which should specifically ensure that procured services are available to people who are not online or do not have a smartphone.

Public Bodies

Local Authorities

- Ensure that services that they provide or for which they are responsible are available to an equivalent standard for people who are not online or do not have a smartphone.
- Display phone numbers for public enquiries clearly on the home page of websites and make sure that websites comply with the Public Sector Bodies Accessibility Regulations 2018.
- Invest in effective ways to help older people who want to be online to get online, and that this support delivers what older people want and is available on a sustainable basis.
- Designate a Cabinet Member with lead responsibility for digital inclusion, ensure that feedback is regularly sought (including by the use of relevant committees and internal structures), and this issue is reported upon in annual reports and strategic equality plans.
- Use the Digital Service Standards for Wales (developed by the Centre for Digital Public Services) and involve older people, especially people not online, in the design of services, systems and relevant research from the beginning to co-produce better and more accessible services and policies.
- Restore access to hard copy leaflets and information across all sites, such as libraries or hubs, where this has not already returned post-pandemic.

Health Boards

- Ensure that services that they provide or for which they are responsible are available to an equivalent standard for people who are not online or do not have a smartphone.
- Display phone numbers for public enquiries clearly on the home page of websites and make sure that websites comply with the Public Sector Bodies Accessibility Regulations 2018.
- Ensure that a member of the Board at each Health Board leads on digital inclusion, that feedback is regularly sought (including by the use of relevant committees and internal structures), and that this issue is reported upon in annual reports and strategic equality plans.

- Use the Digital Service Standards for Wales (developed by the Centre for Digital Public Services) and involve older people, especially people not online, in the design of services, systems and relevant research from the beginning to co-produce better and more accessible services and policies.
- Restore access to hard copy leaflets and information across all sites where this has not already returned post-pandemic.

Audit Wales

Continue their focus on the digital agenda including digital inclusion, for example by continuing to scrutinise, and report on, local authority digital strategies, and by holding events to raise awareness and share good practice on providing effective services.

Healthcare Inspectorate Wales (HIW)

Strengthen the focus on digital exclusion whilst inspecting NHS services, and regulating independent healthcare providers, and report regularly on digital exclusion.

Care Inspectorate Wales (CIW)

Incorporate the issue of digital exclusion into future work, including inspections and national reviews, and provide regular reports.

Equality and Human Rights Commission

Consider digital exclusion as a specific area of inequality in its future work, including development of its next Strategic Plan.

UK Government

- Publish an updated digital inclusion strategy and provide funding to ensure that this can be properly implemented. The updated strategy should take account of the increasing move to digitalisation in the decade since the last strategy was published and set out how services and information will be fully accessible to people who are not online.
- Work with regulatory bodies (including the Financial Conduct Authority, Ofwat, Ofgem and Ofcom) and provide strategic input to help ensure that services are accessible to customers who are not online and that the issue of digital exclusion is taken into account consistently in regulatory guidance on dealing with vulnerable customers.

Relevant regulatory bodies

- Work together on examining the extent to which existing guidance for vulnerable customers fully addresses the issue of digital exclusion, with a focus on consistency across different sectors where possible.
- Ensure that providers are supporting customers who do not use the internet to receive equivalent levels of service to those who are online and complying with relevant guidance for vulnerable customers, and take appropriate action to address instances where this is not the case.

Utilities and banking sector

- Utilities, including water companies, should consider what more they can do to ensure that older people are aware of their right to sign-up to a Priority Services Register (PSR) to receive extra help, highlighting that being included on the register provides assistance such as access to information in an accessible format. The process should also be made as streamlined and easy as possible.
- Utilities, including water companies, should also consider whether their approach to digitalisation and provision of services fully meets any regulatory guidance in relation to vulnerable customers, and take action to improve services in areas where this falls short.
- Firms subject to the Financial Conduct Authority (FCA) should consider whether their approach to digitalisation and provision of services fully meets the FCA Guidance FG21/1[20] Guidance for firms on the fair treatment of vulnerable customers, and take action to improve services in areas where this falls short.

Broadband providers

- Offer social tariffs designed to support those on a low income, include receipt of Pension Credit in their eligibility criteria, and actively promote these to older people.

Telecoms providers

- Ensure that older people have uninterrupted access to the telephone network during the switch to Voice over Internet Protocol and that communications about the switchover are timely, clear and easy to understand.

Action by the Commissioner

Drawing on the information shared by older people, including as part of this report, the Commissioner will continue to highlight issues around digital exclusion, the serious impact this has on older people's ability to undertake everyday activities, and take appropriate action.

Specifically, the Commissioner will:

- Write to key bodies (including the Welsh Government, UK Government, health boards, local authorities and regulators) with the power to implement change highlighting this report and its recommendations, asking what action they will take, and monitoring this.
- Continue to raise awareness of the issue of digital exclusion, and the increasing impact it has on the day to day lives of older people, with the Welsh and UK Governments, local authorities, health boards and other decision makers.
- Highlight older people's rights in relation to accessing public services and receiving information under the Human Rights Act and Equality Act, and provide information to older people – including via hard copy guides - on existing rights and how to uphold them.
- Provide support to older people experiencing digital exclusion to challenge poor practice, including via the Advice and Assistance Service.
- Scrutinise policy developments and strategy, highlighting areas of digital exclusion, the changes needed to ensure older people can continue to access information and services, and the need for proper Equality Impact Assessments to be undertaken where applicable.
- Issue an update on progress six months after the publication of this report.

Appendix A - Local Authorities and Health Boards who contributed to this report

Local Authorities

- Blaenau Gwent County Borough Council
- Bridgend County Borough Council
- Cardiff Council
- Carmarthenshire County Council
- Conwy County Borough Council
- Denbighshire County Council
- Flintshire County Council
- Gwynedd Council
- Isle of Anglesey County Council
- Merthyr Tydfil County Borough Council
- Neath Port Talbot County Borough Council
- Newport City Council
- Pembrokeshire County Council
- Rhondda Cynon Taf County Borough Council
- Swansea Council
- Torfaen County Borough Council
- Vale of Glamorgan Council

Health Boards

- Aneurin Bevan University Health Board
- Cwm Taf Morgannwg University Health Board
- Hywel Dda University Health Board
- Powys Teaching Health Board
- Swansea Bay University Health Board
- Velindre University NHS Trust

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Comisiynydd Pobl Hŷn Cymru
Older People's Commissioner for Wales

Recommendations - Local Authority

Ensure that services the council provides or are responsible for are available to an equivalent standard for people who are not online or do not have a smartphone.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
5 Connects Centres across the County centrally located within the towns of Flint, Holywell, Connah's Quay, Buckley and Mold provide access to information and services for anyone who does not wish to or cannot access services online. Customer Contact Centre enables customers to access information or request a service in relation to a similar range of functions available in Connects Centres by telephone e.g. homeless, housing repairs, waste and recycling, highway repairs, public transport, home to school transport, parking and enforcement, elections (01352 702121. This can be found with all relevant numbers under 'contact us' at the bottom of the home page and then 'general enquiries'. https://www.flintshire.gov.uk/en/Resident/Contact-Us/Contact-Us.aspx Community Support Hub (Deeside, Holywell) are developed in partnership with BCUHB and provide a one-stop-shop for information, advice and practical support.	Further develop our community hub approach giving access to a range of programmes, services and agencies together in one place Ensure vulnerable people in our communities can access services in person or by telephone Commissioned service partners, including third sector services, are also required to provide accessible services including non-digital through phone numbers and physical locations, plus making services accessible in braille, audio, Welsh and other languages.	Flintshire Strategic Equality Plan (2024-2028) Council Plan (2022-23)	Ongoing

Display phone numbers for public enquiries clearly on the home page of websites and make sure that websites comply with the Public Sector Bodies Accessibility Regulations 2018.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
Contact us tab on Flintshire County Council website home page provides contact numbers for general enquiries, council departments and concerns and complaints. The telephone number for customer contact is 01352 702121. It is not common practice for the number to be displayed directly on the home page – however, relevant numbers for each service can be found under contact us at the bottom of the home page. https://www.flintshire.gov.uk/en/Resident/Contact-Us/Contact-Us.aspx There is an ongoing commitment to continuously review our website and look at ways to make it accessible for everyone.	We are committed to the 5 principles of the Local Digital Declaration which includes ensuring websites and mobile apps are accessible for as many people as possible.	Digital Flintshire Strategy 2021-2026	Ongoing

Invest in effective ways to help older people who want to be online to get online, and that this support delivers what older people want and is available on a sustainable basis.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
Support is provided to assist people to access online services and to get online and is offered through a variety of ways to suit the individual. This includes:	Supporting people to use digital technology through Digital Workforce Volunteers	Flintshire Strategic Equality Plan 2024-2028	March 2026 Digital surgeries launching March '24

• Support to access online services and perform basic online tasks is offered at Connect Centres • Aura Libraries provide support to access online services and basic training either on site or in their own homes through a digital loan scheme. • Community-based digital skills courses are offered in a variety of community settings in partnership with Coleg Cambria. Where appropriate digital loans are arranged for participants through Aura libraries. • Digital Flintshire Hub is an online resource for people looking to improve their digital skills or for individuals looking to assist a friend/family member to get online. • National Databank partnership - Free SIM cards and data vouchers are available from Connects Centres for residents on low incomes to become digitally enabled. Free data has been provided by Virgin Media, O2, Vodafone and Three. • Digital Surgeries launching in March 2024 commencing in Holywell Connects initially. Engagement with older people and older people's groups identifies opportunities to increase digital inclusion.	Continue to provide free of charge public access to the internet at Flintshire Connects Centres and libraries in collaboration with Aura Wales Develop projects to improve connectivity at community facilities. Provide officer resource to support rural households in identifying solutions to connectivity issues. Work with partners to develop and promote a volunteer programme to support people to get online. Support and enable access to the internet and devices to ensure people are not excluded from a digital world. Continue to work with 3rd sector and other partners to identify opportunities to improve digital literacy within communities. Work with the adult learning partnership (North East Wales) to identify opportunities to improve digital literacy within communities. Support digitally excluded older people who want to access online services to get online.	Digital Flintshire Strategy 2021-2026 Age-friendly Flintshire	Ongoing Digital surgeries launching Mar '24 Ongoing Ongoing

Designate a Cabinet Member with lead responsibility for digital inclusion, ensure that feedback is regularly sought (including by the use of relevant committees and internal structures), and this issue is reported upon in annual reports and strategic equality plans.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
Cllr Billy Mullin, Cabinet Member for Governance and Corporate Services. Supported by Cllr Christine as Cabinet Member Social Services and Age-friendly Champion. Digital Strategy Board is in place to oversee and ensure effective delivery of the Council's Digital Strategy.	Reporting on digital inclusion within Strategic Equality Plan annual report and developing additional actions to improve outcomes.	Digital Flintshire Strategy 2021-2026 Strategic Equality Plan 2024-28	Annually

Use the Digital Service Standards for Wales (developed by the Centre for Digital Public Services) and involve older people, especially people not online, in the design of services, systems and relevant research from the beginning to co-produce better and more accessible services and policies.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
We are committed to the 5 principles of the Local Digital Declaration which includes ensuring services are designed around the needs of the people using them.	We are committed to the 5 principles of the Local Digital Declaration which includes ensuring services are designed around the needs of the people using them. Consultation and engagement strategy (under development) will consider how	Digital Flintshire Strategy 2021-2026	

Integrated impact assessments are carried out as part of the process for designing/developing policies an services.	users are involved in the design of services/systems. Increasing access to participation to services and decision making for all protected group through developing robust impact assessments.	Flintshire Strategic Equality Plan 2024-2028	March 2028

Restore access to hard copy leaflets and information across all sites, such as libraries or hubs, where this has not already returned post-pandemic.			
What is happening now	**What we are committed to do**	**Strategy/Action Plan**	**Timescale**
5 Connects Centres across the County centrally located within the towns of Flint, Holywell, Connah's Quay, Buckley and Mold provide advice and information in person. Connects Centres are promoted as a channel of access to information and services for anyone who does not use digital. Information can be printed (e.g. leaflets, consultation documents, surveys) on request. SPoA is the main contact point for access to wellbeing information and advice and services to meet the care and support needs of adults in Flintshire. Members of the public can telephone the SPoA to seek information and advice about statutory and non-statutory support based on their health and wellbeing	Under the Social Services & Wellbeing (Wales) Act 2014 Social Services is committed to providing easy access to information and advice to enable individuals to make decisions about the help they need to achieve well-being. Leaflets on social care services are available including alternate formats upon request e.g. Easy Read, Large Print, and Braille.		

needs. Appropriate information is posted out to the individual where required. Flintshire Local Voluntary Council (FLVC) deliver a Social Prescribing service, based at the Flintshire SPoA, to provide information and coordinate referrals to third sector services. Ageing Well Engagement Officer (AWEO) engages with older people and older people's groups to understand priorities and provide opportunities for participating in age-friendly initiatives. The AWEO also shares information via older people's groups and community venues.	Continue to work with communities to raise awareness of activities and services.	Age-friendly Flintshire	Ongoing

SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday 6th June 2024
Report Subject	Deferred Charges Audit Report
Cabinet Member	Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

As part of the Internal Audit programme of work for 2022/23 an audit of deferred charges and the management of residential care liabilities in Social Services was undertake.

A Deferred Payment is only available for individuals who are receiving care and support in a residential or nursing care home setting. It is an agreement between the individual in receipt of care and the Council which allows for a deferment or a delay in paying for care costs until a later date. The costs deferred are repaid at a future date.

During the Internal Audit of the existing Deferred Payment process eight actions were identified which as needing action, five of which were red and three amber.

Since the completion of the audit report the Financial Assessment and Charging Team have established a Task and Finish Group to address the agreed actions, this work is taking place alongside the implementation of a new finance software system which will support the additional monitoring and control measures identified in the audit report.

RECOMMENDATIONS	
1	To provide Scrutiny Committee with information on the actions undertaken since the completion of the Internal Audit report.
2	To provide Scrutiny Committee with assurance that the remaining actions are being undertaken within the timescales laid out in the audit report and that progress is being monitored effectively.

REPORT DETAILS

1.00	**EXPLAINING DEFERRED CHARGES AUDIT REPORT**
1.01	Each local authority is required to have in place a deferred payment scheme which supports eligible individuals to cover the cost of their residential or nursing care. The scheme allows individuals to use the value of their assets (normally their home) to defer these care costs until a later date.
1.02	The audit considered the adequacy of and adherence to policy and process and evaluated controls in place to ensure any monies owned to Flintshire incurred through provision of long-term residential care are recovered in line with current policy. Management also requested the audit review a sample of historic cases where challenges have been identified.
1.03	The audit identified that clear information is provided to individuals which sets out the eligibility criteria of the scheme and the conditions under which a deferred payment is provided – Appendix 1.
1.04	The audit also identified eight areas for action, five of which are a high priority and three are a medium priority.
1.05	**Actions Taken to Date**
1.06	A working group has been established consisting of the Financial Assessments Team Leader, a Financial Assessment Officer and a Planning and Development Officer. An Action Plan is in place and is working through the risks identified through the Internal Audit but has also identified additional areas of work to further improve processes. This group report progress to the Senior Manager Safeguarding and Commissioning on a six-weekly basis. Progress reports are also prepared and presented to the Social Services Senior Management Team.
1.07	The Social Services client information system, PARIS, has been amended to create a specific section in the system which will allow for the detailed recording of deferred payment applications. Functionality has been built into the system to allow reporting functionality to support ongoing monitoring.
1.08	Once this new section in PARIS has been fully tested, all steps in the process, financial information and management information will be recorded in one central location and will ensure consistency in information recording. The reporting functionality will allow for clearer management oversight and greater control measures and will remove the need for separate spreadsheets which are currently being maintained.
1.09	A report of all deferred payment cases will be produced from PARIS every six weeks, this will be used as source data for the six weekly Debt Review Meetings which will continue to be held between senior managers in Social Services and senior officers from the Collection and Enforcement Team. At these meetings data from PARIS will be reconciled with Collection and Enforcement data and actions agreed.

1.10	Case File Audits are being introduced and these will take place every six weeks, initially based on the discussions held at the Debt Review Meetings. The Case File Audits will be scheduled to follow on from the Debt Review Meetings and will review adherence to practice as well as identify areas of best practice and learning.
1.11	The new section in PARIS also creates an additional functionality where cases can be immediately escalated to Senior Management. An example of escalation would be where the Council is unable to register a charge on a property. An escalation report will be produced every six weeks detailing all Deferred Payment activity and including early notification of potential areas of risk and appropriate decisions. This report alongside the information from the Debt Review Meeting and the Cast File Audits will be presented to the Senior Manager Safeguarding and Commissioning for review, risk assessment and decision. Based on the three sources of information detailed above, each case will be awarded a RAG Status and appropriate actions identified. All cases identified as having a red RAG status will be reviewed six weekly, all cases identified as having an amber RAG status will be reviewed every 18 weeks and all cases identified as having a green RAG status will be reviewed every six months.
1.12	The working group will be reviewing all existing property and deferred payment cases on the 17 April 2024 and inputting the information into the new section in PARIS. Once this is complete the six weekly reporting and oversight activity will commence.
1.13	Monthly Legal Surgeries with Blake Morgan Solicitors are taking place and the Financial Assessments and Charging Team Leader is liaising between Debt Recovery and Flintshire Legal Services to resolve any issues identified with specific cases.
1.14	**Ongoing Actions**
1.15	Further Legal Surgeries have been arranged to review every legal charge and Deferred Payment Agreement. These Legal Surgeries will include colleagues from the Collection and Enforcement Team. We have also requested detailed guidance from Blake Morgan on the detail of various forms of legal charge and their appropriate use. This information will be shared with the Financial Assessment and Charging Team, the Collection and Enforcement Team and Legal Services.
1.16	Training will be provided to all relevant Financial Assessment Officers regarding Deferred Payment Agreement and the types of legal charges available, the differences between them and in what circumstances they apply.
1.17	Further improvements to the processes have been identified which will be undertaken during the next six months. These include reviewing and creating new template letters and reviewing associated processes linked to the new finance software system.
1.18	A review of historic cases will be undertaken and feed into a wider policy review.

1.19	The wider policy review will be undertaken once the initial monitoring and management oversight processes are in place. The review will take into account learning from the Legal Surgeries to ensure the effectiveness of all legal charges.
1.20	A quarterly report on progress will be presented to the Social Services Senior Management Team for review and challenge.
1.21	**Next Steps**
1.22	A full report on progress will be provided to Informal Cabinet, Health and Social Care Overview and Scrutiny Committee and full Cabinet.
1.23	An update report be brought to this Governance and Audit Committee in six months to provide an update on progress against the Audit Recommendations as well as sharing progress on additional actions taken outside the original finding of the Audit.

2.00	**RESOURCE IMPLICATIONS**
2.01	Resources necessary to implement improvements have been identified from existing experienced staff in the service and are currently working on the action plan and improvements.

3.00	**IMPACT ASSESSMENT AND RISK MANAGEMENT**
3.01	The risk relates to the recovery of outstanding debt under the existing deferred payment agreement, the risk to the Council is currently moderate as the existing measures in place are ensuring debt recovery. However, the improvements and actions identified from the audit will give greater management oversight and create an actively managed risk register which gives a RAG rating to all deferred payment property debts. These actions once complete, will reduce the risk to low.

4.00	**CONSULTATIONS REQUIRED / CARRIED OUT**
4.01	None at this time.

5.00	**APPENDICES**
5.01	Appendix 1 – Paying for Residential Care leaflet
5.02	Appendix 2 – Internal Audit Report
5.03	Appendix 3 – Action Plan

6.00	CONTACT OFFICER DETAILS
6.01	Contact Officer: Jane Davies Telephone: 01352 702503 E-mail: jane.m.davies@flintshire.gov.uk

7.00	GLOSSARY OF TERMS
7.01	**PARIS**: Is the Social Services Client Information System where the case notes and details of all individuals who access services through Social Services are recorded. **RAG:** A Red, Amber and Green rating system taking into account likelihood and impact.

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Social Services

Paying for Residential Care Information Leaflet

April 2023

CYNGOR Sir y Fflint
Flintshire
COUNTY COUNCIL

PAYING FOR RESIDENTIAL CARE – INFORMATION LEAFLET

Mae'r ddogfen hon ar gael yn Gymraeg / This document is available in Welsh

RELATES TO (POLICY)	Charging Policy
REFERENCE NUMBER	LL02
DEPARTMENT	Adults Social Services
AUTHOR	Sally Swarbrick
LAST REVIEW DATE	April 2023
DATE OF NEXT REVIEW	April 2024

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PAYING FOR RESIDENTIAL CARE

You may be able to receive financial support towards your care if you are assessed by a Social Worker as needing residential or nursing care. This factsheet provides information about how a decision is made by Flintshire County Council when we are asked to provide financial assistance towards the cost of fees charged by a care home. Flintshire County Council complies with the Social Services and Well-being (Wales) Act 2014.

Depending on your finances you may be expected to meet all or part of the cost of the care from your own resources as soon as you go to stay in a home. In most instances you can choose which home you go into.

You must not give away any financial resources such as cash, property or deprive yourself of any assets for the purpose of reducing your ability to pay Flintshire County Council charges. If you do, Flintshire County Council may still regard those resources as belonging to you. If you have any doubt about your position you should seek legal advice.

You may have already read the 'Thinking about a care home' guide which is issued by the Welsh Government. Please ask your Social Worker if you would like a copy.

If you receive funding from Flintshire County Council you will still be able to keep £39.50 (a Personal Allowance) of your assessed weekly income to pay for your personal expenses.

Charges from Flintshire County Council will not be applied if you are under 18, getting help under Section 117 of the Mental Health Act 1983 or have been assessed as meeting the criteria for Continuing Health Care, which is assessed and funded by the Local Health Board.

Paying for residential/nursing care is quite a complicated subject and you will need to discuss options with your Social Worker or a Social Services Financial Assessment Officer.

At all times it is vital that you seek independent advice.

SAVINGS AND CAPITAL LIMITS

If you have savings and/or capital more than £50,000.00 you will have to pay the full standard charge for the Care Home you choose. You will not receive financial assistance from Flintshire County Council. This may also be the case if you own more than one property. If your savings and assets are under £50,000.00 we will need to complete a financial assessment.

We will count 50% of the balance in any joint accounts you hold with your spouse/partner as being yours and 100% of balances in your sole name. We also include fixed-term savings plans, investment bonds* and shares held in your name.

If you hold an account with someone other than your spouse/partner we will count 100% of the balance as being yours unless it can be evidenced otherwise.

*Certain investment bonds that include life insurance cover may possibly be excluded from calculations.

What happens if my savings and/or capital fall below £50,000.00?

If you are self-funding your current care fees and your savings reach the capital limit, you should in the first instance contact the Council in which the care home is located for assistance with funding. This means if the care home is located in Wrexham or Cheshire, you will need to contact the respective Council for assistance.

Deprivation of Assets

The Local Authority may consider that individuals have deprived themselves of assets in order to reduce their charge. Deprivation of assets occurs when a person has deprived or decreased their overall assets resulting in the reduction or removal of any charge imposed for their care and support. This means that they must have made a conscious decision to do this in the knowledge that to do so would have such an effect on their charge.

The following actions would be considered as deprivation of assets:

- A lump-sum payment to someone else, for example a gift
- Substantial expenditure has been incurred suddenly and is out of character with previous spending
- The title deeds of a property have been transferred to another person
- Assets have been put into a trust that cannot be revoked
- Assets have been reduced by living extravagantly, for example buying an expensive sports car

We will not give financial assistance to anyone who we believe has deliberately disposed of capital/savings so that they fall below £50,000.00. They will be asked to pay the full cost for their services with no funding assistance from the Authority.

HOW IS THE AMOUNT A PERSON HAS TO PAY WORKED OUT?

A Welfare Benefits Officer from Flintshire County Council will arrange to visit you to complete a Financial Assistance Claim Form to help the Financial Assessment Officer work out how much you can afford to pay towards your services. We will need this information as soon as possible otherwise you may have to pay the full weekly cost of the service you receive. You can request to have a family member, friend or someone you trust to be present to support you at this visit.

What if I don't want to or fail to give you information on my finances?

If you choose not to tell us your financial circumstances or don't provide the information we need to complete the assessment, you will be expected to pay the full cost of your care home fees with no financial assistance from the Council.

If you do not have the correct information at the time of the Welfare Benefits Officer's visit, written details of what further information is required will be provided. You have a maximum

of 14 working days to provide this further information. Please let us know if you are experiencing difficulties providing this or we may assume that you no longer require financial assistance.

Once we have assessed your savings/capital as being below £50,000.00 we look at your income. The assessment is completed by totalling 100% of all pensions and benefits less the Personal Allowance.

The Personal Allowance amount is an amount set by the Welsh Government and is the minimum amount you must be left with if you are in a permanent care home placement.

- We use either the capital sum of any savings or investments or the interest you receive depending on the type of investment.
- We do not count your spouse/partner's pensions and benefits or their savings.
- We do not count any Mobility Component of Disability Living Allowance or Personal Independence Payment.
- We do not count the first £39.50 of your weekly income as this is the Personal Allowance Amount.
- We do not count the first £5.75 of any Savings Credit you may receive each week.

For Example:

Income

State Retirement Pension	£104.85
Occupational Pension	£72.60
Assessable Income	£177.45

Disregard

Personal Allowance	£39.50
Total Disregard	£39.50
Weekly charge	**£137.95**

Your Financial Assessment Officer will write to you to confirm the outcome of your financial assessment.

Please note entitlement to benefits such as Attendance Allowance, Personal Independence Payment and Disability Living Allowance (care component) will stop after four weeks of admission to a Residential or Nursing Home, therefore you should notify the Department of Work and Pensions of admissions to avoid overpayment of benefits.

WHAT IF I OWN A PROPERTY?

The value of your house, any other property or land will be taken into account when working out your contribution towards your care after the first twelve weeks. During the first twelve weeks the Council will complete a financial assessment based on your income and capital only, this is called the 'twelve week disregard' and when the value of your property and/or land is not included in the calculation. The aim of this is to give you time to decide what you are going to do with your former home. During this period you will still be expected to pay your assessed contribution to the care home. You will also have to maintain the property and meet any on-going costs that arise.

From the thirteenth week onwards you will be considering to be a self-funding resident as the value of your property will be taken into account. You will be asked to pay back the Council's contribution towards your care home fees from the sale of your property from the thirteenth week. You will also be entitled to claim Attendance Allowance, a benefit awarded to help pay towards the cost of your care, from this date. A Welfare Benefits Officer can assist you to complete this claim.

The Council will, by means of a legal charge, recover the amount paid on your behalf. This will be removed once the Council has received payment in full for fees accrued against your property.

If your spouse or partner continues to reside, on a permanent basis, in your home when you move into a care home, the value of this property **will not** be included in our calculations; however if you own a second home and/or land the value of this land/property will be counted and you may be deemed as self-funding.

If someone else other than your spouse or partner continues to reside in your home when you move into a care home, for example your child or friend, the value of this property may well (with certain exemptions) be included in our calculations. You should discuss this with a Financial Assessment Officer or a Welfare Benefits Officer.

The Deferred Payment Agreement

The Council may consider entering into a Deferred Payment Agreement where you do not have to immediately sell your property to fund your residential care but can 'defer' the sale to a later date. You will enter into a legal agreement with the Council and a legal charge will be placed on your property. This charge will be removed once the Council has received payment in full for fees accrued.

There are administration charges to cover the cost of setting up and maintaining the agreement for as long as necessary. Other charges such as legal costs will also apply. The amount of money accruing against your property will have interest charged on it, please be aware that this interest will be compound.

You are advised to seek legal and financial advice before entering into a Deferred Payment Agreement.

If you would like further information regarding the Deferred Payment Agreement please discuss with the Welfare Benefits Officer or your Financial Assessment Officer.

If you have transferred the ownership of your home to someone else e.g. children or grandchildren the notional value of the property may still be counted as your savings/capital and funding may be refused.

SHORT TERM, RESPITE AND TEMPORARY CARE

When a stay is arranged in a care home for Short Term Care such as emergencies or Respite Care, the Welsh Government Guidelines are that the charges be the same as if you are living at home. Short Term Residential or Nursing Care for up to a period of 8 weeks will be assessed under the policy for Community Care Services.

If a Short Term Care placement exceeds eight weeks, it should be treated as a Temporary Placement and will be assessed under the charging policy for Residential and Nursing Care. If a placement is known to be Temporary (whether it does or does not have an expected end date) it will be assessed under the charging policy for Residential and Nursing Care from the date of admission.

QUERIES AND CHALLENGING THE ASSESSMENT OUTCOME

If you have any queries about or think that an error has been made in the assessment of your contribution towards the cost of residing in a care home, you should contact a Financial Assessment Officer. If this does not resolve the matter to your satisfaction you can ask for the Financial Assessment Team Leader to review your application. Our contact details are:

Financial Assessment and Charging Team
Social Services
County Hall
Mold
Flintshire, CH7 6NN 01352 701318

You can request a review any time after we have written to you confirming your weekly assessed contribution. You must tell the Council why you want the decision to be looked at again. You can do this by either speaking or writing to your Financial Assessment Officer.

It is important you let your Financial Assessment Officer know of any changes to your income or circumstances as this could have an effect on your weekly assessed contribution.

All financial assessments are reassessed every April in line with the annual benefit uplift, this review is completed automatically and you do not need to contact us during this time. Once your reassessment has been completed we will write to you confirming your new weekly assessed contribution.

HOW CHARGES CAN BE PAID?

Once you have been advised of your assessed weekly contribution you will need to arrange to pay your contribution directly to the care home. Most care homes offer a Standing Order service or will accept cheques. They tend to prefer to be paid on a monthly basis. Please note, if you are in a care home owned by Flintshire County Council you will receive an invoice from the Council for your contribution.

AM I CLAIMING THE CORRECT BENEFITS?

When you decide to go into a Home, your Social Worker will ask a Welfare Benefits Officer to visit to complete forms with you and ensure that you (and your family) are in receipt of all the correct benefits. Any new benefits you will be entitled to due to your change in circumstances will be included in your assessment. A Welfare Benefits Officer will assist you with any new claims.

WHAT HAPPENS TO THE INFORMATION GIVEN TO SOCIAL SERVICES?

We respect your privacy, however, on occasions we are obliged to share information with third parties in order to verify the information, for the prevention or detection of crime and/or for the purpose of discharging any statutory or administrative function or as required by law.

DETAILS OF FLINTSHIRE FEES FOR APRIL 2023 TO MARCH 2024

The maximum weekly amount (including contributions that is paid to a privately owned care home contracted with Flintshire County Council is outlined below :

Privately owned care home	
Elderly / Very dependent elderly	£727.55
EMI residential	£821.58
Nursing care (over 60)	£852.94
EMI nursing	£915.61

Please note Social Services pay an additional £7.48 per week towards all nursing placements in Wales.

There may be some care homes whose weekly fees are greater than those agreed by the Local Authority. The difference between the rates will be charged by the care home as a 'top up fee'. For example, the Council's set weekly fee is £727.55 and you choose a care home which costs £750.00 per week. As your chosen care home costs more than the fee set by the Council a top up payment of £22.45 will need to be paid. This is in addition to your weekly assessed contribution and is often paid by a member of your family or can be paid by yourself if you have sufficient savings. Please discuss top ups with care homes and take this into account

when making your decisions. The third party should seek legal advice to fully understand the implications of agreeing to the top up.

Nursing and EMI Nursing care residents will also receive a Funded Nursing Care contribution from the Health Authority. This is currently £184.32 per week and is set by the Health Board. The NHS will pay this directly to the nursing home in addition to the care home fees. In some cases the Health Authority can agree to pay the full weekly cost of your care home, this is known as Continuing Health Care Funding. There is a process that must be followed when applying for this funding and until this has been agreed you will still have to continue to pay your weekly assessed contribution to the care home. Your Social Worker will apply for the above funding on your behalf if appropriate. For more information regarding Funded Nursing Care and Continuing Health Care Funding please discuss with your Social Worker.

USEFUL CONTACTS

A wide range of voluntary organisations provide independent advice and assistance. Contacting them will give you information on your rights.

Flintshire Citizens advice Bureau	
08444 772020	www.flintshirecab.org.uk
Flintshire Care and Repair Flintshire Care and Repair offer advice on housing repairs, adaptations and benefits for disabled and elderly people.	
01352 758700	www.flintshirecr.co.uk
Age Connects North East Wales	
08450 549969	www.acnew.org.uk
Mencap Cymru Helpline	
0808 808 1111	www.mencap.org.uk/wales
MIND	
01352 757637	www.flintshiremind.org.uk
North East Wales Carers Information Service (NEWCIS)	
01352 752525	www.carers.org/local/wales/flintshire
Flintshire Disability Forum	
01352 755546	
Social Services First Contact, Preswylfa, Hendy Road, Mold, Flintshire, CH7 1PZ	
03000 858 858	SSDUTY@flintshire.gov.uk www.flintshire.gov.uk/careinfo

COMPLAINTS, COMPLIMENTS AND REPRESENTATIONS

We are aware that despite our best efforts there may be occasions when you need to make a complaint. Any complaint about the services can be made to your Social Worker, their Team Manager or you can contact:

The Complaints Officer
Social Services
County Hall
Mold
Flintshire, CH7 6NN 01352 702623

A leaflet 'Your right to compliment and complain' which explains how your comments can be made and how they will be dealt with is available from the same address or online at: www.flintshire.gov.uk/careinfo

A wide range of information on the care and support system in Wales is available online at:

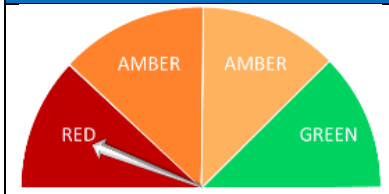
www.dewis.wales

Mae'r ddogfen hon ar gael yn Gymraeg. Cysylltwch a 03000 858 858 i gael fersiwn Gymraeg.

This document is available in Welsh. Please contact 03000 858 858 for a version.

This leaflet is available in alternate formats including Braille and Large Print on request to 03000 858 858.

23/24 – Deferred Charges and Management of Residential Care Liabilities – Social Services - Report Ref 14-2022/23 Nov 2023

Assurance Opinion:	Number of Actions	
	Priority	Number
	High (Red)	5
Limited Assurance – Urgent process revision required (one of more of the following) • Key controls are absent or rarely applied • Evidence of (or the potential for) significant financial/other losses • Key management information does not exist • System/process objectives are not being met, or are being met at a significant and unnecessary cost or use of resources **Conclusion: a lack of adequate or effective controls**	Medium (Amber)	3
	Low (Green)	0
	Total	8

Risks Reviewed as Identified in Scope
Risk 1: Management information is not available, analysed, or timely to assist with recovery activities and mitigate the risk of FCC not being able to recover its costs. **Risk 2**: Designated process to monitor and recover care costs has not been defined, is not adequate or being adhered to. **Risk 3**: The charge placed against properties is not of sufficient priority and does not stand up against challenge.

Audit Background

Residential care spend is significant for all local authorities. At Flintshire County Council (Flintshire) the two weekly CIS payment run report on 28/5/23 identified

CIS payment run	RESIDENTIAL (Long Term)	NURSING (Long Term)	RESIDENTIAL (Short Term)	NURSING (Short Term)	Total
Payments	**£630,267.91**	**£267,137.05**	**£68,396.16**	**£2457.62**	**£968,258.74**

Some of these payments represent long-term loans to eligible service users to cover the costs of their care. The process by which these costs are deferred and recovered is a specific risk which requires mitigation. Flintshire's ability to recover against these loans is dependent on effective controls around accuracy of the population; timely and accurate understanding of debt landscape; securing Deferred Payment Agreements; effectiveness of legal charge; quality of monitoring and effectiveness of debt pursuance.

A deferred payment scheme is a legal arrangement with Flintshire. It lets a service user use the value of their home to help defer payments for long term residential care to a later date. A legal charge is secured against the property and is removed once the debt is paid. A service user must request a deferred payment agreement (DPA) it cannot be forced upon them. Flintshire can approve, approve with discretion, or refuse an application in line with certain criteria. If the service user applies and qualifies, Flintshire should arrange a DPA to be in place following the 12-week disregard period.

After the 12-week disregard period it should be clear how the service user intends to manage their LT residential care costs – either immediate payment for their contribution or has applied and been approved for a DPA for costs to be deferred until property is sold or on death.

Where circumstances affect the ability of Flintshire to exercise any of these controls; commensurate escalation, decision making, and mitigating actions should be in place. Some of these decisions will be difficult and management need to balance the needs of the service user with the risk of financial loss.

The audit considered the adequacy of and adherence to policy and process and evaluated controls in place to ensure any monies owned to Flintshire incurred through provision of long-term residential care are recovered in line with current policy. Management also requested the audit review a sample of historic cases where challenges have been identified.

Accuracy of the financial assessment and accuracy of 'non-recoverable' long term residential costs did not form part of the scope of this audit. We were unable to test controls applied by the Deputyship team due to time constraints.

Areas Managed Well
• The Deferred Payment Scheme leaflet and Paying for Residential Care Information Leaflet is given to each service user. These align with statutory expectations, and outline eligibility criteria and conditions of deferred payment. • The 3 service users who have signed a deferred payment agreement had charges placed against the property.

	Findings and Implications	Agreed Action	Who	When
1R	**Management Dataset - Overall reliability / housekeeping (URN 3552)** Accurate and timely management information helps ensure management's understanding and decision making is well informed. Management advise information around long term (LT) residential care service users is held in the three sources below. The **Property Debt Spreadsheet** (PD) - kept by the Financial Assessment Team (FACT). Management advise it identifies all recoverable property cases (72 at time of testing). Testing identified: • There are no spreadsheet controls/protections in place to prevent entries / amounts being amended or deleted. • Not all columns in the spreadsheet have been completed to show the progress of the case. • Key fields of the process including property charges are not captured.	We have allocated a Planning and Development Officer to work with FACT to implement actions which will mitigate the risks identified and improve working practices. A meeting has been held and a workflow plan has been agreed. A matrix of all the appropriate management information will be created by the end of January 2024, based on proposals made by the Internal Audit team. The matrix will allow for accurate and timely management information to be held in one place and visible to the Team	Jane Davies	31 May 2024

Findings and Implications	Agreed Action	Who	When
• There are several tabs on the spreadsheet. Two service users were recorded on more than one tab of the spreadsheet. • Information relating to DPA is inaccurate. • It is unclear when the spreadsheet was last updated. The **PARIS system -** holds information relating to each service user. Dates and evidence of property charges placed against the respective properties are captured under the notes and the charge registration field. The 'Current Properties with Charges' PDF report can be generated from PARIS. Testing identified: • The number of records on the PD does not reconcile with the Current Properties with Charges PDF report provided at the same time. • 15 discrepancies between the dates of charges captured on the PARIS system to those sampled with Legal as part of the testing. • A reconciliation between the datasets does not take place. The **Long Term Debt** (LTD) **report and LTD supporting spreadsheet -** holds data of outstanding debt. It is produced by the Debt Recovery team. Testing of the 17/1/23 document identified: • Two service users appear on the LTD report but do not appear on the PD. • Six service users appear on the PD as deceased but do not appear on the LTD report. • Neither service was aware of these discrepancies. • A reconciliation between the datasets does not take place. There is a risk these datasets are incomplete / inaccurate, and the lack of reconciliation between these may impact on the quality and reliability of the information being used by the service.	Manager, Service Manager, and Senior Management Team. This will ensure full management understanding of deferred payments, the legal charges supporting them, the progress being made and identify any areas of concern quickly and all in one place. These changes will be woven into the implementation of the new FACT software system ContrOCC which will go live in April 24and will support with provision of data and the monitoring of deferred payment processes.		

Findings and Implications		Agreed Action	Who	When
2(R)	**Long Term Residential care - recoverable costs – visibility (URN 3554)** LT residential care costs represent a significant spend for all local authorities. Knowing which costs are recoverable and being assured that risks to Flintshire's ability to recover are sufficiently mitigated is important. Accuracy of this population is a key control as is anytime, accurate and efficient monitoring of levels of outstanding debt/liability. We requested a list of all service users and payments who were in LT residential care funded by Flintshire to distinguish between recoverable and non-recoverable costs from source. Management provided the three sets of information referred to in Finding 1. We highlight general housekeeping and specific control issues with each of these datasets across this report. We reviewed the two weekly CIS report as an indication of spend (25/5/23). CIS lists all payments to providers for long term / short term residential or nursing care. (Table 2). Testing identified: • Recovery of LT residential care costs is not recorded as a risk on the risk register. • LT Residential payments for a 2-week period amounted to £630,267.91. • The same budget code is used for all LT residential spend. Management has no means to efficiently distinguish between payments which are non-recoverable, and those which FCC will seek to recover apart from the PD. • We were able to match 35 service users on the CIS payment run to clients on the PD. • This represents £39k of costs which are 'recoverable' (Table 2). • LT Residential care costs are visible on a provider level, but unless specific and resource heavy analysis is undertaken, not for each service user. • Payment made for each service user is not reflected as a monthly debt/liability, invoiced via Accounts Receivable (AR), against which payment is to be deferred.	The matrix of information to address Risk 1 will also provide information to address Risk 2. The matrix of information will identify the levels of outstanding debt and liability and RAG rate the risks attached to the recovery of those long-term debts which will be implemented in January 2024. The matrix will distinguish between non-recoverable and recoverable costs as part of this process. It will also record the action plan to reduce that risk rating. We will also address the wider risk by completing a policy review to evaluate the current operating model and approach including transfer of liability/ debt recovery and all associated implications. Revised policy to be presented to Cabinet for review and approval by November 2024.	Jane Davies	30 Nov 2024

	Findings and Implications	Agreed Action	Who	When
	• An invoice is only raised where circumstances change (property sold / service user deceased). • Calculation of service user costs is completed by FACT relying on data held in CIS/PARIS/PD rather than the ledger (actual spend). • Production of the statements and final invoice including accuracy of interest charged is based on management rather than financial data from source. • Seven service users appear on PD but are coded to LT Nursing Care on CIS. It is noted that these workarounds may result from the lack of functionality within PARIS but also the way in which service user deferred charge is not recorded in the ledger. The current process (and system) means management cannot extract information from the ledger to evidence a real time and accurate level of outstanding debt/liability which it is seeking to recover at both corporate and service user level. There is a risk Flintshire is unable to effectively quantify the population and report levels of recoverable debt and this impacts on effectiveness of operational controls including regular reconciliation and budget monitoring.			
3(R)	**<u>Deferred Payment Agreement (URN 3551)</u>** Flintshire's policy provides that *'following the 12-week disregard period, should the service user have a property which has not met the property disregard criteria, the value of a property will be incorporated into the financial assessment calculation. This may result in the service user being required to contribute to the costs of the residential care. If they do not have the immediate funds to do so, they have the option of putting the property up for sale or enter into a Deferred Payment Agreement (DPA) with Flintshire*'. The policy also advises a DPA should be put in place in the event the service user chooses to delay the sale of the property until a later date.	Monthly FACT Specific Legal Surgeries have now been established with Blake Morgan Solicitors. The advice is being provided by a lawyer specialising in social care finance practice and is specific to the needs of FACT. Each Deferred Payment Agreement will be reviewed and through the Legal surgeries and where the effectiveness of the legal charge is in question, an	Jane Davies	30 Nov 2024

Findings and Implications	Agreed Action	Who	When
Management advise the PD, column 'G', states whether a DPA is in place, and column 'I' holds a date for DPA signed. Testing of the spreadsheet and supporting process identified: • The Financial Assessment form does not make any reference to the DPA process. • Nine of the 72 individuals on the PD are recorded as having a DPA. • On request for these agreements, management confirmed only three DPAs were in place and not nine. • Only two of these service users have dates populated in column I to show when the DPAs were signed. • Management information to explain how the remaining (69) intend to cover the cost of their care and how Flintshire interests are being sufficiently protected is limited. <u>No DPA – service user intending to sell property</u>. The established procedures stipulate that if no details are received on how the property is being marketed within 14 days of the letter being sent out by the FAO, the FACT manager will be contacted for guidance on what action to take next. The guidance states the insistence of the service user entering a DPA will be the norm rather than the exception. We are unable to evidence the use of a DPA with this population as a 'bridging loan' which will allow time to sell property to pay care fees but also protect Flintshire's interests. <u>No DPA – service user insufficient capacity to sign</u> Legal advised a service user does not need to give permission for a charge to be raised e.g., where a service user's property has not been disregarded but they do not have capacity to enter into an agreement. Where a person lacks capacity either the person's family or Flintshire take steps to help secure a power of attorney / court of protection after which a DPA should be signed.	alternative charge will be sought. This has begun and it has proven helpful for the service. Any identified areas of risk of non-payment will be reported upon monthly and escalated as required. Training will be provided to all Financial Assessment Officers involved in the work to ensure correct agreements and charges are in place going forward. Review current policy and ensure alignment to required practices. Review of matrix will assist with lessons learned whilst identifying the required revisions to the current policy.		

Findings and Implications	Agreed Action	Who	When
Due to time constraints, we have not reviewed the Deputyship process. <u>No DPA – Flintshire refuse DPA / service user ineligible / property can't be disregarded service user refuses to sell or sign</u> It is for Flintshire to decide whether to agree or refuse an application for a DPA. Flintshire can never force a DPA on a service user (and can still raise a legal charge). Management advised none have been refused to date. It is unclear how many service users have applied for a DPA however, only 3 have been signed. The DPA is a legal agreement which provides enforceable assurance the service user accepts the terms of this long-term loan. It strengthens Flintshire's position when pursuing debt, ensures the property is not subsequently occupied by family or tenants and the asset is kept in a good state of repair to ensure the value is adequate to secure the debt. It also provides for additional fees to be charged including compound accrued interest / administration fees as well as other legal costs which may eventually apply. Where a DPA is not in place the service user is at financial advantage of securing an interest free long-term loan from Flintshire. We are unable to evidence, where services users have been offered a DPA but refused to apply, how the risk to recovery is being proactively managed. Continuing to pay for service users where Flintshire is unable to sufficiently recover via a DPA, or where effectiveness of legal charge raised may be an issue; represents higher risk (Table 1). We report on the effectiveness of type of charge it is possible to raise in these circumstances to protect Flintshire's interests and the policy on how Flintshire will respond where it is unable to sufficiently secure recovery needs to be defined.			

	Findings and Implications	Agreed Action	Who	When
	There is a risk of non-compliance with current procedure. Current process does not evidence assurance that the risk of non-recovery is sufficiently managed where a DPA is not in place. The procedure where Flintshire refuses a DPA is not clearly defined.			
4(R)	**<u>Week 13 Day 1 risk escalation & decision-making process (URN3556)</u>** Week 13 day 1 represents Flintshire's liability for LT residential costs with the provider on behalf of the service user. Ideally a DPA and/or charge will already be in place to mitigate by this date. Understanding when these mitigations are not/not yet/never will be in place and taking effective decisions to manage/escalate the risk is important. It is understood Flintshire has a duty of care to support its citizens. Flintshire currently will continue to pay for these LT residential costs until the property is sold or service user death. Management advise conversations are had with the service user and/or their representative and updated in the service users' Paris record. Meetings / conversations with specialists in legal and debt recovery are on an ad hoc basis. Internet research identified other local authorities and 3rd sector guidance highlighting the risk that "*If your property is not sold during the 12-week property disregard period and you do not want, or are refused, a deferred payment agreement, it is likely the authority's contract with the care home will end*". Management has confirmed liability for LT residential care costs (from week 13 day 1) is not transferred to the service user under *any* circumstance during the time of their stay in a care home. It is seen as policy that the risk to Flintshire's recovery is overridden by the need to support the service user and that payments will continue.	The monthly Legal Surgeries, the matrix management of information and the initial monthly reporting of Deferred Payments to senior management, will provide early sight of risk areas and monitoring of performance of risk management of existing debts – as detailed above, We will also address the wider risk by completing a policy review to evaluate the current operating model and approach, including decision making at week 13 day 1 and its implications. Revised policy to be presented to Cabinet for review and approval by November 2024.	Jane Davies	30 Nov 2024

	Findings and Implications	Agreed Action	Who	When
	Testing identified: • Nine cases on the property debt spreadsheet do not appear on the property charges PDF from Paris. • Six of these also do not have a DPA in place. • We identified payments for two of these service users on the most recent CIS payment run 28/5/23. According to the property debt spreadsheet ST00943A has been an asset since 5/10/21. There is no asset detail available for ST00315A. • Management information re case management / action plan to resolve is insufficient including specialist legal advice or reporting to senior management. The role of internal audit is not to suggest payments for care should cease. This finding raises the need for risk management - that the policy of continued payments where risk to recovery is highest should be discussed and approved, and the process for escalation of these high-risk cases should be defined and decision making at an appropriate level is evidenced. Decisions should be reported, and impacts reflected in line with corporate risk management practice. The risk of financial loss to Flintshire increases with these types of cases, especially if not consistently highlighted and managed commensurately including escalation, reporting, and securing specialist advice.			
5(R)	**<u>Debt pursuance, recovery and write off (URN3555)</u>** The team manager for Collections and Enforcement within the Debt Recovery Team has advised all pursuance and recovery across Flintshire is undertaken in line with the Corporate Debt and Fair Debt policies. At time of testing the LTD 17.01.23 reported debt outstanding as £1,301,566.28. LTD makes up approximately 55% of the total Social Services Debt and amounted to £1.4 million as of January 2023.	Internal Audit will provide a copy of this report to Debt Recover. Invite Debt Recovery to the Legal Surgeries in order that the recovery charge and process could be understood and recovery action agreed.	Jane Davies	30 Nov 2024

Findings and Implications	Agreed Action	Who	When
Management do not view payments for LT residential care as debt reflected in AR on a regular basis against which payment is to be deferred. Instead, an invoice is raised by the FACT team once circumstances change i.e., the property is sold, or the service user passes away. These cases are tagged as 'Long Term Debt Hold'. The team manager for Collections and Enforcement assumes that a suitable charge has been placed against the service user's property and income will be eventually received. However, because it is 'Long Term Debt Hold', the debt is not pursued in line with the standard corporate debt recovery policy (30/60/90 days). A quarterly Long-Term Debt (LTD) report is produced by Debt Recovery for senior management. Testing has identified the following: • A specific pursuance / recovery policy has not been defined for LT residential care costs. • A service level agreement is not in place between the two service areas to assist with the timely recovery of this debt in a way which is appropriate for these circumstances. • Seven service users on the LTD spreadsheet do not appear on the property debt spreadsheet. (LTD Value based on last invoice sent £139,178.78) • 36 service users on the property debt spreadsheet do not appear on the LTD. Six are deceased. • Four service users on the LTD report do not have a charge on the Current Properties with Charges PDF report. • 15 service users appear as deceased on the PD. Value on LTD £297,894.62 based on last invoices). These remain on the LTD report indicating recovery is still due. The oldest deceased date is 2008. The most recent invoice date is 14/10/2022. • Two service users are deceased but do not appear on LTD (SP02185A, SS12830A).	As part of this process any debts which may require write off will be identified and reported appropriately to finance colleagues and the Chief Officer. Define the appropriate debt recovery process as part of the policy review.		

Findings and Implications	Agreed Action	Who	When
• A reconciliation does not take place between the datasets. We have not been able to resolve 4 service users (SS12830A/ST00403A/ST00995A/ST01083A & T00998A). • LTD 17.01.23 reported debt outstanding as £1,301,566.28. Finance's Income received / outstanding debt extract reported debt outstanding as £1,107,404.57 (ledger code Property Income SER7119621). FACT does not review either of these reports. We have not been able to reconcile these two reports due to time constraints and the way the debt is structured in the ledger. • The current process means that without high levels of resource and analysis management are unable efficiently reconcile a service user's account from payments made to invoicing for full costs including interest and management fee, to pursuance and recovery. • At the time of reporting, we were unable to resolve whether the final invoice is raised in AR against each service user as a debtor, where debt pursuance action would usually be recorded. We can see invoices coded to Property Income (SER7119621) where any income is receipted. • Management cannot evidence recovery activity has taken place via the LTD/PARIS/PD. **Write Off** We were not able to identify any write off actions against these debts. Debt recovery have confirmed they would not write off this debt as it is expected to be eventually recovered through the sale of the property. However, testing identified accounts on the LTD without a charge against the property, some without a DPA and others with lesser types of charge in place. There are cases where the property has been sold or passed onto other family. Without these key mitigations it is unclear why Flintshire considers it remains in a position to recover against these debts. There is a risk that an appropriate pursuance and recovery process is not in place for these debts payment for which have been deferred – including stages of pursuance, escalation, write off reporting and authorisation. There			

	Findings and Implications	Agreed Action	Who	When
	is a risk as these debts are significant, any write off will have an impact on the FCC's bad debt provision.			
6(A)	**<u>Effectiveness of legal charge (URN 3553)</u>** Flintshire will place a legal charge against a service user's property in order to recover the amount paid in LT residential care costs. This charge is removed once Flintshire has received payment in full for fees accrued against the property. Management advises there are instances where a charge cannot be raised for example tenants in common, applicant not having capacity and power of attorney not having been obtained etc. However legal have advised a service user does not need to give permission for a charge to be raised. At time of reporting, we were unable to reconcile this difference. Testing identified: • Of the 72 service users on the PD, nine did not have a charge against the property. • The Current Properties with Charges PDF report lists a total of 87 properties with a charge. • A service level agreement is not in place between the two service areas to assist with the specialist legal aspects of charges. There are a variety of charges which can be placed against a property depending on whether the property is registered or not. These will impact on the ability of Flintshire to recover costs. The types of charges are: 1. Land Reg Charge - registered property 2. Land Reg Restriction - registered property in joint name so restriction in respect of person 3. Class B Land Charge - unregistered property 4. Note with Local Land Charges - Note with Local Land charges register	Through the Legal Surgeries, the appropriateness of each charge and recovery process is being reviewed. This will include the appropriateness of the charge and actions that need to be taken to ensure the pursuance and recovery of the debt in due course. As part of this process any debts which may require write off will be identified and reported appropriately to finance colleagues and the Chief Officer. Learnings will be incorporated into the policy review.	Jane Davies	30 Nov 2024

	Findings and Implications	Agreed Action	Who	When
	When considering a DPA application, Flintshire has to accept a Type 1 charge as sufficient security to protect its interest however it has discretion over whether to accept the other types of charges as sufficient and can refuse a DPA on this basis. Legal have advised the note with LLC (charge 4) would only notify Flintshire the property was being sold rather than ensure any recovery. Social Services would need to contact the service user representative to attempt to negotiate a payment. There is nil legal obligation on the representative to make such a payment if a DPA has not been signed. This risk materialised in the case of SS12830A and now attempting to recover from FD534056. The service user died in 2017, last invoice £28,047.86 dated 14/11/2019. These costs are yet to be recovered. (Table 3) Management advise they were not aware of the different charges placed on properties and the impact on Flintshire's ability to recover. Management does not differentiate between the various types of charges on the Current Properties with Charges PDF report generated from PARIS nor on the PD. Current process does not evidence whether the charge placed on a property will be sufficiently effective for recovery or whether more specific mitigation actions / decisions are required. It is unclear how many cases have lesser charges on which Flintshire is relying on to recover. There is a risk that relying on an ineffective charge means Flintshire will never be able to recover the funds it is due. The process does not address the risk that a less effective charge increases the risk of non-recovery and financial loss.			
7(A)	**<u>Annual / Bi-annual property statement (URN 3557)</u>** The Social Service and Well-Being (Wales) Act 2014, Part 4 and 5 of the code of Practice, requires local authorities to provide those service users on a DPA with a six-monthly written update of the amount of care costs deferred, of the	A six-monthly written update of the amount of care costs deferred inclusive of interest and administrations costs will	Jane Davies	31 Dec 2023

Findings and Implications		Agreed Action	Who	When
	interest and administrative costs accrued to date, of the total amount due and an estimate of the equity remaining in the home not covered by the required amount deferred. Testing identified updates are not being sent every six months as required and the updates provided do not include any reference to the estimate of the equity remaining in the home not covered by the required amount deferred. This is also crucial aspect in Flintshire's decision whether to revoke the DPA. Service users who have not secured a DPA but where there is a charge placed on the property should receive a property statement at year end advising of the total amount owing to FCC. This requirement is applicable to the majority of cases (96%) on the property debt spreadsheet. We were provided with an example of the statement but there is nil up to date management information to identify compliance with this requirement. Due to lack of time, we have not been able to test this further. There is a risk Flintshire is non-compliant with the requirements set out in the Social Service and Well Being (Wales) Act 2014 Part 4 and 5 or the Code of practice. We are unable to evidence accurate calculation of interest due as well as judgement on remaining equity being sufficient to enable full cost recovery.	be provided to the service users or their appropriate representative. Prior to the implementation of the new FACT software system ContrOCC, this will be undertaken manually. Post implementation in Q4 2023/24 this will be automated through ContrOCC.		
8(A)	**<u>MANAGEMENT REQUEST – Historic Case studies (URN 3550)</u>** Two cases were provided for sample testing as difficulties had been encountered with recovery of debt. We would note the following: • SS05743B deceased 10/09/2019, SS20412A deceased 28/02/2013. • S05743B on LTD £1478.03. We are unable to report the original debt owed on death as the figures in the PD spreadsheet do not reconcile. • SS20412A on LTD £359.43. We are unable to report the original debt owed on death as the figures in the PD spreadsheet do not reconcile.	The new control measures detailed above will mitigate against these types of risks reoccurring in the future. As a further assurance, case file audits will be introduced in the service to ensure compliance with the new procedures detailed above.	Jane Davies	31 May 2024

Findings and Implications	Agreed Action	Who	When
• Neither service user had a DPA in place. Flintshire therefore had limited protection to ensure the property was not subsequently occupied by family or tenants and the asset was kept in a good state of repair to ensure the value is adequate to secure the debt. • A Land Registry restriction (Type 2 charge) and a Class B Land Charge (Type 3 charge) were placed against the properties. • We are unable to evidence action to enforce these charges at time of death. However, as these are lesser types of charges, there is a risk these were insufficient to protect Flintshire's interest and recover the debt. • There was a lack of clarity of role and responsibility between FACT and debt recovery. • Pursuance policy was not in place to provide guidance on the recovery activities to be completed and timescales for these. • Case management and escalation process was not in place. These historic cases highlight several control issues which are also highlighted in this report. There is a risk the current control environment would not sufficiently mitigate against these types of risk reoccurring, leading to significant financial loss.	These audits will include debt recovery assurance, compliance with legal process and delivery of management information.		

Appendix
TABLE 1 – INTERNAL AUDIT RISK PROFILE
TABLE 2 – PAYMENTS MADE VIA CIS 25/5/23
TABLE 3 – RISK TO RECOVERY

Distribution List	
Jane Davies	Accountable Officer Responsible for the Implementation of Agreed Actions
Neil Ayling	Chief Officer- Social Services
Jane Davies	Senior Manager Safeguarding and Commissioning
Sally Swarbrick	Business Manager

Distribution List	
Claire Morris	Financial Assessments Team Leader
FOR INFORMATION	
Neal Cockerton	Chief Executive
Gareth Owens	Chief Officer - Governance
David Barnes	Revenues and Procurement Manager
Matthew Powell	Manager – Legal Services

Audit Priority:

Appendix A

Priority of Audit Finding	
Priority	**Description**
High (Red)	Action is imperative to ensure that the objectives of the area under review are met
Medium (Amber)	Requires action to avoid exposure to significant risks in achieving the objectives of the area
Low (Green)	Action encouraged to enhance control or improve operational efficiency

Audit Opinion:

The audit opinion is the level of assurance that Internal Audit can give to management and all other stakeholders on the adequacy and effectiveness of controls within the area audited. It is assessed following the completion of the audit and is based on the findings from the audit. Progress on the implementation of agreed actions will be monitored. Findings from **Some** or **Limited** assurance audits will be reported to the Audit Committee.

Assurance	Explanation
Green - Substantial	**Strong controls in place (all or most of the following)** • Key controls exist and are applied consistently and effectively • Objectives achieved in a pragmatic and cost effective manner • Compliance with relevant regulations and procedures • Assets safeguarded • Information reliable **Conclusion: key controls have been adequately designed and are operating effectively to deliver the key objectives of the system, process, function or service.**
Amber Green – Reasonable	**Key Controls in place but some fine tuning required (one or more of the following)** • Key controls exist but there are weaknesses and / or inconsistencies in application though no evidence of any significant impact • Some refinement or addition of controls would enhance the control environment • Key objectives could be better achieved with some relatively minor adjustments **Conclusion: key controls generally operating effectively.**
Amber Red – Some	**Significant improvement in control environment required (one or more of the following)** • Key controls exist but fail to address all risks identified and / or are not applied consistently and effectively • Evidence of (or the potential for) financial / other loss • Key management information exists but is unreliable • System / process objectives are not being met, or are being met at an unnecessary cost or use of resources. **Conclusion: key controls are generally inadequate or ineffective.**
Red – Limited	**Urgent system revision required (one or more of the following)** • Key controls are absent or rarely applied • Evidence of (or the potential for) significant financial / other losses • Key management information does not exist • System / process objectives are not being met, or are being met at a significant and unnecessary cost or use of resources. **Conclusion: a lack of adequate or effective controls.**

TABLE 1 – INTERNAL AUDIT RISK PROFILE

GROUP	SERVICE USER	LT RESIDENTIAL CARE COSTS	RISK	CONTROL
1	• >£50K • Service user self-funder • liable for their own LT Residential care costs	NIL	NIL	NIL
2	• <£50K • no property, or other assets • property ineligible – value low or partner, a dependent child, a relative aged over 60, or someone who is sick or disabled still lives home.	NON-RECOVERABLE LT residential care costs	Risk is that payment by Flintshire on service user behalf is inaccurate	• accuracy of payment • regular monitoring, reconciliation, and reporting • nil for debt recovery as none is expected
3	• <£50k • other assets (apart from home) are low • property eligible - value of home is over the threshold for paying part or all of care home costs • own property / has beneficial interest realisable on sale • may/may not have capacity to enter into agreement	RECOVERABLE LT residential care costs	Risk is that payments by Flintshire on service user behalf is inaccurate	• visibility of service user care costs • accuracy of payment • regular monitoring, reconciliation, and reporting
			Risk is that Flintshire payments cannot be recovered	• service user chooses to sell property immediately and pay
				• Service user chooses to delay sale of house • applies for bridging DPA which is approved. • Flintshire raises sufficient legal charge (Type 1)
				• service user chooses to defer payment until death • applies and agrees to DPA which is approved. • Flintshire raises sufficient legal charge (Type 1)
				• Service user nil capacity to agree to DPA • Family/representative to resolve PoW • Flintshire understands available • Service user nil capacity to agree to DPA • Flintshire needs to assist service user to apply and agree to a DPA • Flintshire understands available legal charge • **RISK MANAGEMENT & MGMT DECISION RE**

				legal charge • RISK MANAGEMENT & MGMT DECISION RE CONTINUED PAYMENT • Eventually Flintshire secures DPA with family / personal rep & more effective legal charge raised	CONTINUED PAYMENT • Eventually Flintshire secures PoA, DPA in place & more effective legal charge raised
				• Flintshire rejects DPA application • Flintshire understands available legal charge • Nil in place or likely to be in place to recover • RISK MANAGEMENT & MGMT DECISION RE CONTINUED PAYMENT	
				• Service user / family / personal rep refuses sale and refuses to apply DPA • Flintshire understands available legal charge • Nil in place or likely to be in place to recover • RISK MANAGEMENT & MGMT DECISION RE CONTINUED PAYMENT	
			Risk is that once circumstances warrant (sale / death) debt pursuance and recovery is insufficient	• Accuracy of final invoice • Clarity of pursuance activity which should take place • Regular monitoring and reporting • RISK MANAGEMENT DECISION & ESCALATION • HIGH RISK CASES AS RESULT OF MGMT DECISION TO CONTINU PAYMENT. • Appropriate write off	

TABLE 2 – PAYMENTS MADE VIA CIS 25/5/23

TABLE 2.1 – CIS TWO WEEKLY PAYMENT RUN 28/5/2023 - represents payments by ledger code						
Ledger Code	**ADJM**	**ADJS**	**ADJSM**	**Cost for # of nights**	**T - short term care placement**	**Grand Total**
RESIDENTIAL LT	£ 60.00	£ 14,887.24	-£ 590.53	£ 615,911.20		£ 630,267.91
NURSING LT	-£ 49.30	£ 11,461.47		£ 255,724.88		£ 267,137.05
RESIDENTIAL ST	-£ 986.15	£ 1,795.63			£ 67,586.68	£ 68,396.16
NURSING ST	x	£ 337.02			£ 2,120.60	£ 2,457.62
Grand Total	**-£ 975.45**	**£ 28,481.36**	**-£ 590.53**	**£ 871,636.08**	**£ 69,707.28**	**£ 968,258.74**

TABLE 2.2 – CIS TWO WEEKLY PAYMENT RUN 28/5/2023 - represents RECOVERABLE long term residential care costs if these ARE on the Property Debt Spreadsheet = £39,134.38							
Property Debt Spreadsheet	**OVERALL CODE**	**ADJM**	**ADJS**	**ADJSM**	**Cost for # of nights**	**T - short term care placement**	**Grand Total**
not on PDS	RESIDENTIAL LT	£ 60.00	£10,227.71	-£ 590.53	£279,460.16		£289,157.34
not on PDS	NURSING LT	-£ 49.30	£11,461.47		£244,371.12		£255,783.29
not on PDS	RESIDENTIAL ST	-£ 986.15	£ 1,795.63			£ 67,586.68	£ 68,396.16
not on PDS	NURSING ST		£ 337.02			£ 2,120.60	£ 2,457.62
not on PD (PDSI client)	RESIDENTIAL LT		£ 4,659.53		£308,670.42		£313,329.95
yes	**RESIDENTIAL LT**				**£ 27,780.62**		**£ 27,780.62**
yes but nursing	**NURSING LT**				**£ 11,353.76**		**£ 11,353.76**
Grand Total		**-£ 975.45**	**£28,481.36**	**-£ 590.53**	**£871,636.08**	**£ 69,707.28**	**£968,258.74**

TABLE 2.3 – RECOVERABLE CLIENT NUMBERS	
RECOVERABLE = ON PDS	**£ 39,134.38**
NURSING LONG TERM	**£ 11,353.76**
C00459A	£ 1,820.46
P00817A	£ 1,876.82
S14026A	£ 1,804.78
S28040A	£ 798.94
T00315A	£ 1,662.04
T00675A	£ 1,758.06
T01414A	£ 1,632.66
RESIDENTIAL-L TERM	**£ 27,780.62**
C00081A	£ 665.04
C00734A	£ 1,221.44
C00971A	£ 904.36
P00448A	£ 811.98
P02557A	£ 974.06
S04254A	£ 683.98
S08410B	£ 721.40
S09823A	£ 941.52
S13851A	£ 860.42
S27903A	£ 906.68
S28237A	£ 756.26
T00252A	£ 409.52
T00360A	£ 974.26
T00367A	£ 1,195.48
T00433A	£ 1,084.70
T00567A	£ 650.46
T00710A	£ 886.58
T00716A	£ 921.20
T00731A	£ 803.36
T00943A	£ 755.76
T00966A	£ 1,727.16
T00994A	£ 1,455.10
T00995A	£ 1,643.16
T01195A	£ 1,141.80
T01239A	£ 953.08
T01295A	£ 869.00
T01296A	£ 1,219.70
T01372A	£ 1,643.16

Table 2.4 Ledger information from Finance			
CIS REPORT BUDGET CODES	**detail 1**	**overall**	**DSCRPT JD**
SER7315628	RESIDENTIAL & NURSI	NURSING LT	This is a budget code for Older Peoples commissioned residential care
SER7515628	RESIDENTIAL & NURSI	NURSING LT	This is a budget code for Older Peoples commissioned residential care
SER7715628	RESIDENTIAL & NURSI	NURSING LT	This is a budget code for Older Peoples commissioned residential care
SFF6115628	FOST'G FLINT/H'WELL	NURSING LT	Is not currently used
SLC2315628	PDSI - RESIDENTIAL/	NURSING LT	PDSI is Physical Disability and Sensory Impairment, mostly used for costs for adults aged between 18 - 65 years old
SLC3215628	RESOURCE PANEL	NURSING LT	Is not currently used
SLC9235628	RESID'TL PLACEMENTS	NURSING LT	This is a budget code for people with Learning Disabilities (mostly aged between 18 - 65 years old)
SMR2215625	DEESIDE RESIDENT	NURSING LT	This is a budget code for Mental Health (mostly aged between 18 - 65 years old)
SER7515629	RESIDENTIAL & NURSI	NURSING ST	This is a budget code for Older Peoples commissioned residential care
SCE1145625	**(FCC)PHYS DIS EQUIP**	**RESIDENTIAL LT**	**This is a budget code from the North East Wales Community Equipment Store (NEWCES)**
SER7215625	**FREE NURSING INCOME**	**RESIDENTIAL LT**	**Is not currently used**
SER7315625	**RESIDENTIAL & NURSI**	**RESIDENTIAL LT**	**This is a budget code for Older Peoples commissioned residential care**
SER7515625	**RESIDENTIAL & NURSI**	**RESIDENTIAL LT**	**This is a budget code for Older Peoples commissioned residential care**
SER7715625	**RESIDENTIAL & NURSI**	**RESIDENTIAL LT**	**This is a budget code for Older Peoples commissioned residential care**
SER7715625*	**RESIDENTIAL & NURSI**	**RESIDENTIAL LT**	**This is a budget code for Older Peoples commissioned residential care**
SLC2215625	**PDSI - DOMICILLIARY**	**RESIDENTIAL LT**	**PDSI is Physical Disability and Sensory Impairment, mostly used for costs for adults aged between 18 - 65 years old**
SLC2315625	**PDSI - RESIDENTIAL/**	**RESIDENTIAL LT**	**PDSI is Physical Disability and Sensory Impairment, mostly used for costs for adults aged between 18 - 65 years old**
SLC9235625	**RESID'TL PLACEMENTS**	**RESIDENTIAL LT**	**This is a budget code for people with Learning Disabilities (mostly aged between 18 - 65 years old)**
SLC9315625	**LIFE SHARES**	**RESIDENTIAL LT**	**This is a budget code for people with Learning Disabilities (mostly aged between 18 - 65 years old)**
SMR2215628	**DEESIDE RESIDENT**	**RESIDENTIAL LT**	**This is a budget code for Mental Health (mostly aged between 18 - 65 years old)**
SCE1145626	(FCC)PHYS DIS EQUIP	RESIDENTIAL ST	This is a budget code from the North East Wales Community Equipment Store (NEWCES)
SER7215626	FREE NURSING INCOME	RESIDENTIAL ST	Is not currently used
SER7315626	RESIDENTIAL & NURSI	RESIDENTIAL ST	This is a budget code for Older Peoples commissioned residential care
SER7315626*	RESIDENTIAL & NURSI	RESIDENTIAL ST	This is a budget code for Older Peoples commissioned residential care
SER7515626	RESIDENTIAL & NURSI	RESIDENTIAL ST	This is a budget code for Older Peoples commissioned residential care
SER7715626	RESIDENTIAL & NURSI	RESIDENTIAL ST	This is a budget code for Older Peoples commissioned residential care
SGC2115626*	GENERAL EXPENDITURE	RESIDENTIAL ST	Is not currently used
SLC2315626	PDSI - RESIDENTIAL/	RESIDENTIAL ST	PDSI is Physical Disability and Sensory Impairment, mostly used for costs for adults aged between 18 - 65 years old

TABLE 3 – RISK TO RECOVERY

TABLE 3: Risk to effective recovery - LTD SPREADSHEET @17.01.2023 £837,884.68. RECONCILED WITH LEGAL CHARGES TESTED BY SERVICE USER									
Customer ID	**DECEASED**	**LTD INVOICE DATE**	**LTD @17.01.23**	**DPA**	**Land Reg Charge**	**Land Reg Restriction**	**Class B Land Charge**	**note with LCC**	no info
SS14274A	06/08/2008	31/03/2007	£15,254.06	no					1
SS20412A	28/02/2013	30/06/2022	£359.43	no			1		
SS22438A	28/05/2013	17/09/2013	£34,914.20	no					1
SA23047B	25/07/2015	15/03/2017	£34,568.21	no					1
FD534056 & SS12830A	04/04/2017	14/11/2019	£28,047.86	no				1	
SS09665A	25/07/2018	04/02/2018	£3,458.05	not really			1		
SP02185A	29/03/2019	NOT ON LTD	£ -	no					1
SS05743B	10/09/2019	31/03/2022	£1,478.03	no		1			
SP01554A	17/03/2020	28/05/2021	£936.05	no			1		
SP01179A	19/01/2021	10/03/2021	£21,100.00	no					1
SP02679A	18/06/2021	30/07/2021	£16,230.68	no			1		
SC00329A	07/01/2022	03/02/2022	£46,163.89	CONFIRMED	1				
ST00472A	17/04/2022	18/05/2022	£1,402.04	no			1		
SS18639A	24/07/2022	05/08/2022	£4,913.32	no		1			
SP01903A	09/10/2022	14/10/2022	£76,727.29	CONFIRMED	1				
ST00810A	11/12/2022	18/05/2022	£20,302.50	no	1				
		18/05/2022	£20,086.87	no	1				
SA19699B	NO	06/11/2018	£4,478.06	not really					1
SC00081A	NO	17/03/2022	£13,865.14	no			1		
SD25317A	NO	31/03/2022	£9,577.22	no		1			
SP00448A	NO	31/03/2022	£13,914.49	no	1				
SP01418A	NO	31/03/2016	£8,729.32	no			1		
SP01434A	NO	21/04/2021	£5,821.39	not really					1
		23/06/2022	£28,138.16	not really					1

SP01474A	NO	31/03/2022	£26,134.48	not really			1		
SP01519A	NO	30/06/2022	£19,353.07	no			1		
SS00974A	NO	30/03/2022	£36,412.95	not really	1				
SS08410B	NO	21/04/2022	£13,693.96	no	1				
SS08762A	NO	09/03/2015	£9,496.06	not really					1
SS13851A	NO	31/03/2022	£18,358.14	no		1			
SS21032A	NO	22/09/2021	£17,753.40	not really					1
SS27903A	NO	31/03/2022	£18,879.05	no			1		
SS28040A	NO	31/03/2022	£47,518.74	no					1
SS28237A	NO	24/03/2021	£22,603.88	no			1		
ST00252A	NO	31/03/2022	£12,910.39	no			1		
ST00360A	NO	31/03/2022	£14,589.02	no					1
ST00367A	NO	31/03/2022	£23,326.14	not really					1
ST00403A	NO	30/06/2022	£44,545.07	no					1
ST00433A	NO	17/03/2022	£20,816.92	no	1				
ST00487A	NO	17/08/2022	£5,620.50	not really					1
ST00567A	NO	31/03/2022	£13,173.42	CONFIRMED	1				
ST00675A	NO	17/03/2022	£15,760.50	no			1		
ST00710A	NO	18/05/2022	£19,135.02	no					1
ST00731A	NO	31/03/2022	£13,636.52	no	1				
ST00995A	NO	NOT ON LTD	£ -	no					1
ST01083A	NO	14/07/2022	£4,225.78	no					1
		23/03/2022	£9,475.41	no					1
T00998A	NO	NOT ON LTD	£ -	no					1
	Grand Total		**£837,884.68**						

Deferred Payments and Property Cases Workplan

Task	Source	Deadline
Action Plan of risks in audit report	Brief meeting	31/05/2024
Matrix of info from all systems Property s/s, PARIS, CIS - RAG rated	Audit report	31/05/2024
List all actions in the process from start to debt recovery Inc letters to send, when and what to say	Brief meeting	30/11/2024
Create process for debt recovery	Brief meeting	30/11/2024
Create process and leaflet to give to families	Brief meeting	30/11/2024
Create procedure for deferred Payments process	Additional	30/11/2024
Create procedures for ends (property sale, death or CHC)	Additional	30/11/2024
Create procedure for year end process	Additional	30/11/2024
Create procedure for non co-operative families	Additional	30/11/2024
Create letter – a charge has been registered	Additional	30/11/2024
Create letter – property needs registering with the land registry	Additional	30/11/2024
Create letter - a valuation has been requested	Additional	30/11/2024
Create letter – a valuation has been completed (Deferred Payment Only)	Additional	31/05/2024
Create letter – CHC funded, client contribution to be paid towards property debt accrued	Additional	31/05/2024
Check Deferred Payment Application form is correct Re compound interest and date payment due	Additional	31/05/2024
Deferred Payment contract from legal - is this correct?	Additional	31/05/2024
Create checklist for WBOs – to built into Financial Assessment Claim Form	Additional	31/05/2024
Update WBO process / procedure	Additional	30/11/2024
Update property procedure	Additional	30/11/2024
Create flowcharts for processes and actions	Brief meeting	30/11/2024
Review all property cases	Brief meeting	31/05/2024
Manual Six monthly statements until ContrOCC in place	Audit report	31/12/2023
Introduction of case file audits	Audit report	31/05/2023
Monthly FACT Legal surgeries to review all DP agreements	Audit report	30/11/2024
Review each charge through the legal surgeries, and actions needed to ensure debt recovery	Audit report	30/11/2024

Monthly reports of cases with risk and / or non payment	Audit report	30/11/2024
Training for FAOs around correct agreements and charges - from Blake Morgan	Audit report	30/11/2024
Debt recovery to be invited to legal surgeries	Audit report	30/11/2024
Identify bad debts for write off	Audit report	30/11/2024
Complete a policy review	Audit report	30/11/2024
Incorporate learnings into the policy review	Audit report	30/11/2024
Define the appropriate debt recovery process as part of the policy review	Audit report	30/11/2024
Complete IIA	Audit report	30/11/2024

Completion Due Date **30/11/2024**

Owner	Status	Comments
Gemma	Complete	See second tab
Working Group		Spec sent to PARIS - waiting for matrix to be built
Gemma	Complete	Actions identified and listed in spec for Matrix
Working Group		To be completed once Matrix is in place and process is agreed
Working Group		To be completed once Matrix is in place and process is agreed
Working Group		To be completed once Matrix is in place and process is agreed
Working Group		To be completed once Matrix is in place and process is agreed
Working Group		To be completed once Matrix is in place and process is agreed
Working Group		To be completed once Matrix is in place and process is agreed
Danielle		26/2/24 Danielle to draft template
Danielle		26/2/24 Danielle to draft template
Danielle	Complete	Detail included in initial letter
Danielle		26/2/24 Danielle to draft template
Danielle		26/2/24 Danielle to draft template
Gemma		Draft v2 sent to working group 26/02/24
Ian		
Working Group		To be completed once Matrix is place and process is agreed
		To be completed once Matrix is place and process is agreed
Working Group		Booked date 03/04/24 to review cases and input on new PARIS form
Claire / FAOs	Complete	Confirmation manual process is in place
		To be introduced once Matrix is in place

		PARIS matrix will provide reports
Claire	Complete	Claire meeting with Carwyn & Hannah (Debt Management) and taking the information to Blake Morgan Legal Surgeries. Claire then feeding back to debt recovery in bi-monthly meetings
		To be completed once Matrix is in place and process is agreed

SOCIAL & HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday 6th June 2024
Report Subject	Draft Social Services Director's Annual Report 2023/24
Cabinet Member	Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

The Statutory Director of Social Services is required to produce an annual report summarising their view of the local authority's social care functions and priorities for improvement as legislated in the Social Services and Well-being (Wales) Act 2014 and the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

The purpose of the Social Services Annual Report is to set out the improvement journey and evaluate Social Services' performance in providing services to people that promote their well-being and support them to achieve their personal outcomes.

RECOMMENDATION	
1	Committee members to view the report and feedback on the draft content considered for inclusion.

REPORT DETAILS

1.00	**OVERVIEW OF DRAFT SOCIAL SERVICES DIRECTOR'S ANNUAL REPORT 2023/24**
1.01	This Social Services Annual Report is prepared under the requirements of the Social Services and Well-being (Wales) Act 2014 and the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA). The purpose of the Annual Report is to set out the local authority's improvement journey in providing services to people in their areas, those who access information, advice and assistance, and those individuals and carers in receipt of care and support.

1.02	Following on from the Rebalancing Care and Support Consultation in Summer 2023, changes to the reporting process of the Annual Report are coming into force from the end of this financial year, effecting the 2024/25 report. It is proposed that the annual report and the reporting process will now be: 1) Part of the Performance Improvement Framework. 2) Integral to local authorities' own Social Services planning, scrutiny, and performance improvement actions. 3) Grounded in a rigorous self-assessment of performance, which includes: a) what has been achieved and done well; b) what improvements are needed, informed by feedback from the public, service-users, providers, partners, and other stakeholders; c) action planned and taken to achieve identified improvement needs; and d) progress made against improvement priorities identified the previous year In readiness for these changes, the 2023/24 report has been compiled using the new format and approach. Please see **appendix 5.01** for the Welsh Government guidance document.
1.03	Under the new guidelines, we assess our performance against each of the four areas in the Performance Improvement Framework – People, Prevention, Partnership and Integration, Well-being. In each area we will evaluate: **1. What do we know about the quality and impact of what we are doing?** **2. How do we know? e.g. what evidence from research, engagement and the metrics are we using to inform this assessment?** **3. What are we doing well and how can we do better? What are our priorities for improvement particularly over the coming year** **4. What progress did we make on the areas for improvement identified in last year's report? What difference did we make?** The four areas of the Performance Improvement Framework include eight high-level quality standards as follows: **People** 1.1 All people are equal partners who have voice, choice and control over their lives and are able to achieve what matters to them. 1.2 Effective leadership is evident at all levels with a highly skilled, well qualified and supported workforce working towards a shared vision. **Prevention** 2.2 The need for care and support is minimised and the escalation of need is prevented, whilst ensuring that the best possible outcomes for people are achieved.

<table>
<tr><td></td><td>2.2 Resilience within our communities is promoted and people are supported to fulfil their potential by actively encouraging and supporting people who need care and support, including carers, to learn, develop and participate in society.

Partnerships And Integration
3.1 Effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people.
3.2 People are encouraged to be involved in the design and delivery of their care and support as equal partners.

Well-being
4.1 People are protected and safeguarded from abuse and neglect, and any other types of harm.
4.2 People are supported to actively manage their well-being and make their own informed decisions so that they are able to achieve their full potential and live independently for as long as possible.</td></tr>
<tr><td>1.04</td><td>The draft annual report can be found in <u>appendix 5.02.</u></td></tr>
<tr><td>1.05</td><td>The report is intended to provide the public, the regulator and wider stakeholders with an honest picture of services in Flintshire and to demonstrate a clear understanding of the strengths and challenges faced.</td></tr>
<tr><td>1.06</td><td>The report will form an integral part of Care Inspectorate Wales’ (CIW) performance evaluation of Flintshire Social Services. The evaluation also informs the Wales Audit Office’s assessment of Flintshire County Council as part of the annual improvement report.</td></tr>
<tr><td>1.07</td><td>The draft Social Services Annual Report has been prepared following an in-depth review of current performance by the Social Services Senior Management Team, Service Managers and Performance Officers. The improvement priorities contained within the report are aligned to the priorities contained within our Portfolio Business Plan and the Council Plan.</td></tr>
<tr><td>1.08</td><td>The final report is scheduled to presented at the following meetings:
<table><tr><td>SSMT</td><td>27 June 2024</td></tr><tr><td>Informal Cabinet</td><td>2 July 2024</td></tr><tr><td>Cabinet</td><td>16 July 2024</td></tr><tr><td>Social Care and Health Scrutiny Committee Scrutiny</td><td>18 July 2024</td></tr></table></td></tr>
<tr><td>1.09</td><td>The final report will be produced in an electronic friendly style by Double Click. The report will also be translated into Welsh and be made available on the Flintshire County Council website.

A mock-up of the proposed design can be found in <u>appendix 5.03.</u></td></tr>
</table>

1.10	The final Annual Report will also include the improvement priorities identified for 2024/2025. The agreed priorities can be found in the draft report, but also as a separate document in **appendix 5.04.**

2.00	**RESOURCE IMPLICATIONS**
2.01	The priorities identified within the report are aimed at delivering service improvements, improving outcomes and meeting local needs within the context of achieving challenging financial efficiencies and value for money. The improvement priorities contained within the report have been identified for delivery within existing resources.

3.00	**IMPACT ASSESSMENT AND RISK MANAGEMENT**
3.01	The report is to be published by the end of September 2024.

4.00	**CONSULTATIONS REQUIRED / CARRIED OUT**
4.01	Work began with Social Services Managers in October 2023 to gather updates on progress made with achieving the priorities set for 2023/24.
4.02	The draft Social Services Annual Report has been discussed at SSMT, COT and Informal Cabinet.

5.00	**APPENDICES**
5.01	Local Authority Social Services Annual Report (Director's Report) Guidance
5.02	Draft Social Services Annual Report 2023/24
5.03	Design Mock Up from Double Click
5.04	Social Service Priorities for 2024/25

6.00	**LIST OF ACCESSIBLE BACKGROUND DOCUMENTS**
6.01	Contact Officer: Dawn Holt Telephone: 01352 702128 E-mail: dawn.holt@flintshire.gov.uk

7.00	GLOSSARY OF TERMS
7.01	CIW - Care Inspectorate Wales ensure that services meet the standards the pubic expect. They register, inspect and take action to improve the quality and safety of services for the well-being of the people of Wales.

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Local Authority Social Services Annual Report (Director's Report)

Guidance

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1. Introduction

1.1 This guidance will help local authorities prepare their annual social services reports. It replaces guidance issued in 2017 by the Welsh Government and the Association of the Directors of Social Services Cymru. The revised guidance reflects developments since the original guidance was issued, and feedback from local authorities and stakeholders.

1.2 The guidance:

- explains the requirements for the annual report.
- reflects the Welsh Government's intention to work with local authorities and Care Inspectorate Wales to integrate the annual social services report into the new Performance Improvement Framework. The annual report "*will then be the overall mechanism that local authorities will use to demonstrate performance…."*
- outlines the target audiences for the report and provides the option for a separate report in a form more suitable for the public; and
- provides suggestions for good practice

1.3 Subject to making new codes and regulations, this guidance takes effect from the end of the 2023-24 reporting year. It is issued to local authorities in advance to allow arrangements to be made to meet the new requirements. The guidance is advisory but refers to legal requirements for the publication of the annual social services report, most notably the *Local Authority Social Services Annual Report Regulations*.

Key features

1.4 The annual report and the reporting process will now be:

(i) Part of the Performance Improvement Framework.

(ii) Integral to local authorities' own social services planning, scrutiny, and performance improvement actions.

(iii) Grounded in a rigorous self-assessment of performance, which includes:

a) what has been achieved and done well.

b) what improvements are needed, informed by feedback from the public, service-users, providers, partners, and other stakeholders.

c) action planned and taken to achieve identified improvement needs; and

d) progress made against improvement priorities identified the previous year

1.5 There are three appendices:

- Appendix A: Template for the content of the report
- Appendix B: Statutory requirements relating to the report
- Appendix C: Good practice notes for reporting to the public

2. Legal and policy context

2.1 The Social Services and Well-being (Wales) Act 2014 ("the 2014 Act") requires local authorities, health boards and the Welsh Ministers to promote the well-being of people who need care and support and carers who need support.

2.2 The Act seeks to ensure:

- People have control over what support they need, making decisions about their support as an equal partner.
- There is proportionate assessment that focuses on the individual.
- Carers have an equal right to an assessment for support to those they care for.
- Easy access to information and advice is available to all.
- Arrangements to safeguard people are stronger.
- A preventative approach to care and support needs.
- Local authorities and health boards work in partnership to drive integration, innovation and service change including new forms of provision.

2.3 The Act is clear about the need for local government ownership of changes required by the 2014 Act so that the "*benefits of locating social services within local government are maximised and are part of local government's corporate responsibility for promoting well-being, social inclusion and community safety".*

Legal requirements for the Annual Social Services Report

2.4 The legal requirements for the annual social services report are set out in the 2014 Act, codes made under the Act, and regulations. More detailed information is provided in Appendix B of this guidance.

2.5 Section 144A of the 2014 Act requires that, *as soon as reasonably practicable* after the end of the relevant financial year, a local authority must publish a report on the exercise of its social services functions. The report must:

- contain the information set out in codes and any regulations made under the 2014 Act.
- be presented to the Council by the Director of Social Services.
- be copied to the Welsh Ministers, which includes Care Inspectorate Wales.
- be published on the Council's website.

2.6 Throughout the guidance, this report, required by statute, is termed the "**section 144A report**" to distinguish it from any optional separate report produced for the public and the corporate self-assessment report required under the Local Government and Elections (Wales) Act 2021 (the "2021 Act").

Performance Improvement Framework

2.7 The Welsh Government considers that the annual reporting process for social services is now part of the new Performance Improvement Framework. This is a code made under section 145 of the 2014 Act on the exercise of social services functions. Its provisions are therefore mandatory. It replaces the *"Code of Practice in Relation to Measuring Social Services Performance"* issued in 2016 and its associated technical guidance. This more comprehensive framework reflects an ambition to review data

requirements for social services to ensure they are fit for purpose and reflect the impact of the 2014 Act. **Social Services and Well-Being Act 2014**

2.8 The purpose of the Framework is to:

- Ensure there is a clear nationally understood approach to inform performance and improvement
- Inform the content and structure of the section 144A report.
- Enable practitioners to understand the use of evidence to support and improve practice and to ensure staff are appropriately skilled and qualified.
- Enable local authorities to understand how the Welsh Government will hold them to account.
- Ensure local authorities are working to the same high standards.

2.9 The foundations for the new framework are 8 high-level quality standards under four headings:

1. **People**
2. **Prevention**
3. **Partnerships and integration**
4. **Well-being**

2.10 The headings provide a structure for the regular reporting of agreed performance metrics. The Framework says:

"*the high-level quality standards are intended to be aspirational, not a check list to be met"* and that they are *"designed to challenge local authorities, to raise ambition and to encourage innovation*". They aim to ensure that people who need care and support and carers who need support "*are able to access the right support at the right time from the right place and that there are appropriately experienced and/or qualified professionals in place to deliver this*"

2.11 The following table lists the eight high-level quality standards under the four main headings:

Table 1: Performance Improvement Framework - High-level quality standards

People	• *All people are equal partners who have choice, voice and control over their lives and are able to achieve what matters to them* • *Effective leadership is evident at all levels with a highly skilled well qualified and supported workforce working towards a shared vision.*
Prevention	• *The need for care and support is minimised and the escalation of need is prevented whilst ensuring that the best outcomes for people are achieved*

	• *Resilience within communities is promoted and people are supported to fulfil their potential by actively supporting people who need care and/or support including carers to learn develop and participate in society*"
Partnership and integration	• *Effective partnerships are in place to commission and fully deliver fully integrated, high quality sustainable outcomes for people* • *People are encouraged to be involved in the design and delivery of their care and support as equal partners*
Well-being	• *People are protected and safeguarded from abuse and neglect and any other types of harm* • *People are supported to actively manage their well-being and make their own decisions so that they are able to achieve their full potential and live independently for as long as possible*

2.12 The Framework requires local authorities to demonstrate progress against the quality standards through the section 144A report **and** that they are using evidence and research to support their service provision and improvements.

2.13 The quality standards align with Care Inspectorate Wales' Code of Practice for the review of local authority social services. They are also linked to the seven well-being goals in Section 4 of the Well-being of Future Generations (Wales) Act 2015.

2.14 The Welsh Government has produced three supporting documents to assist local authorities in capturing and using performance information and data:

Measuring activity and performance guidance

2.15 This guidance explains how local authorities should collect data and evidence. It also sets out a framework of metrics covering adults, children, and carers, which must be collected and submitted to Welsh Government together with anonymised person-level data and aggregated data on specific aspects of social care. It states local authorities should also gather their own data to understand better how the local delivery of social care is working according to local priorities. Measuring social services performance: code of practice | GOV.WALES

2.16 The data will be used to:

- Better understand local services and the people who use them
- Provide a consistent baseline against which to analyse activity and assess compliance and improvement against the requirements of the 2014 Act.
- Inform policy evaluations at the national level
- Inform Care Inspectorate Wales' reviews of performance of local authorities and any national thematic reviews.
- Inform Social Care Wales in its role of supporting improvements in the sector.

- Inform other local authorities and statutory partners to help promote collaboration

2.17 The data is reported separately to Welsh Government but should be cited where appropriate in the self-assessment part of the section 144A report. See Appendix A

Understanding experiences and outcomes

2.18 This provides practical ideas to help local authorities understand the experiences and outcomes of those who use social services. It describes ways of engaging people and some of the tools and methodologies which are being used around Wales including: Developing Evidence Enriched Practice, Results Based Accountability, Brights Spots (survey for looked after children), and Person-Centred Community Care Inventory. It contains advice on creating survey tools, including digital surveys; a template for outcome-focussed case studies; advice about managing research activities involving engagement with people including sampling, ethical considerations, safeguarding and the law concerning the use of personal data.

Understanding experiences and outcomes of the Social Services Performance and Improvement Framework | GOV.WALES

Using evidence to inform improvement

2.19 This guidance provides practical ideas and advice about how evidence can be used to inform social services at local, regional, and national levels. It includes advice on understanding and using evidence, collecting, and analysing evidence, and ensuring evidence is used consistently and sustainably. Social Care Wales and the Social Care Institute for Excellence have also published a report "*Using Evidence in Social Services and Social Care in Wales*

Performance and Improvement Framework for Social Services: using evidence to inform improvement | GOV.WALES

Using evidence in social services and social care in Wales | SCIE

3. Annual Social Services Report

Purpose of the report

3.1 The Performance and Improvement Framework describes the purpose of the section 144A report as being to:

- set out a local authority's improvement journey in providing services to people who access information, advice and assistance and individuals receiving care and support and carers receiving support.
- use information obtained from the new framework and other sources to demonstrate how local authorities have promoted well-being and accounted for the delivery of quality standards.
- evidence progress against the eight quality standards, and to inform decisions on how to respond from the perspective of the social services function at a corporate, organisational level.
- Evidence how the standards and principles in the National Framework for Commissioning Care and Support are making a contribution to meeting the needs of people receiving care and support from social services and improving well-being outcomes.
- enable the Welsh Government to collate, analyse and understand data and evidence on the delivery of care, and support for carers across Wales.

Self-assessment

3.2 Sections 89-91 of the 2021 Act place new duties on local authorities to keep their performance under review, to consult local people and others on the performance and to report annually on performance in a "self-assessment report".

3.3 The Welsh Government has produced guidance on these new duties Performance and governance of local authorities: statutory guidance | GOV.WALES. The guidance defines self-assessment as:

> "*a corporate, organisational assessment rather than an assessment of individual services*". It also says that this corporate self-assessment process "*will not require councils to look again in detail at the social services function"*

3.4 The self-assessment for the section 144A report is intended to mirror the self-assessment principles of the report produced under the 2021 Act, but at a service rather than a corporate level.

3.5 Self-assessment for social services requires the local authority to ask itself and answer the questions set out in Appendix A in the context of the Framework's eight high-level quality standards.

3.6 To be effective, the self-assessment should be:

- Integrated in the way the authority monitors, reviews, and reports its performance in social services, and not a stand-alone process.

- Considered integral to performance systems, not an exercise in compliance.
- Open, honest, balanced, and objective about achievements and challenges
- Focussed on outcomes, the effects on people's lives and experiences not descriptions of process
- Grounded in good evidence using qualitative and quantitative information from a variety of sources including bespoke research.

3.7 The annual reporting process should be a year-round one integral to a local authority's business planning, review, monitoring and performance improvement arrangements. Local authorities are best placed to decide how this is achieved considering their own systems and corporate performance management arrangements and how findings from this annual reporting process can inform any cross-cutting themes for the 2021 Act corporate self-assessment.

Timescale for publication

3.8 The 2014 Act says that the report should be published as soon as reasonably practicable after the end of the financial year. If information for the report is collected over the course of whole year, then depending on the local authority's own processes for signing off the report, it should be possible to publish the report by the end of July. In normal circumstances, it should not be produced any later.

Target audiences

3.9 The Framework says:

> "*Welsh Government will use evidence gathered through the Code to understand the impact local authorities' social services are having at national, regional and local level. The aim is for evidence to be used at all levels of the social care system – individuals (e.g. social workers and occupational therapists), by local authorities, at the regional levels (e.g. Regional Partnership Boards), and at the national level i.e. Welsh Government, to inform and sustain continuous and consistent improvement, and strength-based practice*".

3.10 The **Welsh Government** intends to use evidence from the reporting process to understand the effectiveness of national policy, to inform future policy development, and to ensure continuous improvement in all parts of Wales.

3.11 **Care Inspectorate Wales** will use the evidence to inform its performance review activity.

3.12 **Social Care Wales** will draw from the reports in their key roles in supporting practitioners, local authorities, and the wider care sector to understand and use data effectively and supporting service improvement.

3.13 For **members of the public**, local authorities may, if they wish, publish a separate report in a more appropriate format and style. The form and content of that report should be determined locally in the light of local needs and preferences. This might be a wholly separate report or a plain- language summary report which used as an

opening chapter of the section 144A report that can also be published separately. Good practice notes for reporting to the public are provided in Appendix C.

Appendix A: Template for the content of the section 144A report

A1 The structure of the report should follow the order of the underlined headings set out below and make use of the guidance supporting the Performance Improvement Framework.

Director's summary

A2 An overview of performance in a form which could be used in a separate version of the report produced for the public.

Context section

A3 A factual section setting out how the service operates and covering the following elements.

- **Leadership:** A short narrative explaining how the local authority's political leadership, governance, scrutiny, and challenge arrangements help to set priorities and promote well-being across the local authority's functions.

- **Workforce:** Information on the social care workforce, recruitment and retention covering directly provided and commissioned services highlighting challenges and any solutions in place to address them and how staff are supported and developed in their professional roles.

- **Financial resources** Budget information by service areas for the reporting year and comparison with the previous year.

A4 The information need only be brief statements highlighting any significant change since the previous year. It is acceptable to refer to separate published documents if a reference or electronic link is provided.

Performance assessment section

A5 This section should report against each of the four areas in the Performance Improvement Framework – People; Prevention; Partnership and Integration; Well-being. In each of them, the commentary should answer four self-assessment questions:

1. **What do we know about the quality and impact of what we are doing?**

2. **How do we know? e.g. what evidence from research, engagement and the metrics are we using to inform this assessment?**

3. **What are we doing well and how can we do better? What are our priorities for improvement particularly over the coming year**

4. **What progress did we make on the areas for improvement identified in last year's report? What difference did we make?**

A6 The self-assessment should be evaluative, drawing on qualitative and quantitative evidence. The emphasis should be on self-assessment and not just a description of what is provided. Evidence from a range of sources can be used e.g. operational

performance data, research, surveys, engagement events, consultations and citizens' panels. Where any of the metrics set out in the Measuring Activity and Performance Guidance are cited, sufficient context should be provided e.g. is it an improving trend?

A7 Some material might well relate to more than one of the four quality standard headings below. Where this applies, local authorities should include the material under the heading considered most appropriate. Where necessary, cross-referencing should be used to avoid repetition in different sections.

People

A8 Quality standards:

- *"All people are equal partners who have choice, voice and control over their lives and are able to achieve what matters to them"*
- *Effective leadership is evident at all levels with a highly skilled well qualified and supported workforce working towards a shared vision".*

A9 This should explain how the local authority is exercising its functions under Parts 3 (Assessing the Needs of Individuals) and Part 4 (Meeting Needs) and, where appropriate, (Part 10 Advocacy) of the 2014 Act including:

- Ensuring that people are at the centre of services and communities.
- People have a strong voice and control over what they receive (with advocacy where appropriate) and the views of service users and carers are reflected in the authority's assessment of its performance.
- How people are shaping the services they receive.
- The focus is on what matters to them, the outcomes they wish to achieve and how they can use their own strengths and resources to help promote their own well-being.
- Practitioners and managers ensure that practice and supervision are grounded in up-to-date knowledge and evidence-based practice.
- The social services function is well-led and supported at a service, corporate and political level.
- Welsh language: progress in the context of More than just words Five Year Plan 2022-27 and the Active Offer.

Prevention

A10 Quality standards:

- "*The need for care and support is minimised and the escalation of need is prevented whilst ensuring that the best outcomes for people are achieved"*
- *"Resilience within communities is promoted and people are supported to fulfil their potential by actively supporting people who need care and/or support including carers to learn develop and participate in society*"

A11 This should explain:

- The use of preventative and integrated approaches, ensuring the right care and support is there at the right time to delay or avoid the escalation of need.

- How services and outcomes are proportionate, targeted, and sustainable, and supported through the promotion of social enterprises, co-operatives, user-led services and the third sector.

A12 Preventative activity can include wide-scale measures aimed at the wider population as well as targeted interventions for individuals

Partnership and integration

A13 Quality standards:

- *"Effective partnerships are in place to commission and fully deliver fully integrated, high quality sustainable outcomes for people"*
- *"People are encouraged to be involved in the design and delivery of their care and support as equal partners"*

A14 This should explain:

- How well the local authority and its health board(s) are collaborating to identify needs and develop integrated population assessment reports to underpin the shaping and commissioning of sustainable services.
- How well the authority has supported collaboration and partnership including with other local authorities, the third sector and providers.

A15 Where appropriate, the report should refer to other reports such as those of regional partnership boards, population needs assessments and area plans and reflect on regional and partnership plans.

Well-being

A16 Quality standards

- *"People are protected and safeguarded from abuse and neglect and any other types of harm"*
- *"People are supported to actively manage their well-being and make their own decisions so that they are able to achieve their full potential and live independently for as long as possible"*

A17 This part of the report should explain how well the local authority has:

- Exercised its social services and allied functions to make a positive contribution to the well-being of people needing care and support and carers needing support, respecting their culture, beliefs and other personal characteristics, and respecting their wishes and feelings
- Built upon people's personal circumstances, capabilities, networks and local communities
- Worked with people to develop creative solutions
- Put effective safeguarding arrangements in place

A18 "Neglect" includes activity to prevent serious self-neglect.

A19 Local authorities can refer and provide a link to the reports of regional safeguarding boards and other agencies for more detail where appropriate.

A20 Well-being for adults and children is defined in Part 2 of the 2014 Act and in more detail in the National Outcomes Framework [Social Services Nation Outcome

Fraework]. Councils are no longer required to report separately against each of the 6 well-being quality outcomes featured in the National Outcomes Framework.

Other information section

A21 These are matters to be reported on which do not necessarily fit just one of the quality standards.

Inspections and reviews

A22 If, within the reporting year, Care Inspectorate Wales has reported on the Council's social services functions, the main points should be included. Any improvements made by the Council or planned in response to the inspection report should be highlighted. It is good practice to reference and provide a link to the full inspection report on the Care Inspectorate Wales' website.

A23 The authority should also include in its self-assessment and priorities for improvement how it proposes to act on any relevant findings and recommendations from CIW's periodic thematic reviews and any relevant reports by Audit Wales, the Public Services Ombudsman for Wales or the Older People's and Children's Commissioners. It is acceptable to make a brief reference here and direct the reader to another document for more detail.

Complaints and representations

A24 What matters most is not the statistics, but any discernible trends and what changes and improvements the authority has made, or proposes to make, in response to complaints and investigations. For numbers of complaints, it is acceptable to refer and provide a link to the Council's corporate annual complaints report for more detail if statistics for social services complaints are disaggregated.

A25 Complaints and representations include any received from the Citizen Voice Body established under the Health and Social Care (Quality and Engagement) (Wales) Act 2020.

Referencing other sources of information

A26 What is effectively an overview report cannot cover every aspect of all a local authority is doing in its social services and allied functions. The commentary can explain that because an area has not been chosen as a priority objective does not mean that nothing is happening elsewhere. The reader can be directed to other reports such as service level, corporate plans and supporting business plans if they require more information. Good practice is to include a reference and an electronic link where any other document in the public domain can be found.

Appendix B: Legal requirements for the Annual Social Services Report

B1 Section 144A of the Social Services and Well-being (Wales) Act 2014 requires local authorities to prepare and publish an annual report about the exercise of their social services functions as soon as reasonably practical after the end of the financial year to which it relates.

B2 Section 144A says the report must include:

(a) details of how the authority has exercised its social services functions during the financial year, including details of the extent to which the authority has—

(i) acted in accordance with requirements imposed on local authorities by a code issued under section 9 (codes to help achieve outcomes in relation to well-being),
(ii) acted in accordance with any relevant requirements contained in a code issued under section 145 (codes about the exercise of social services functions), and
(iii) had regard to any relevant guidelines in a code issued under section 145, and

(b) such other information as may be prescribed by regulations.

(c) the details provided under subsection (2)(a)(ii) must state how the authority has satisfied any requirements contained in a code relating to assessing the needs of an individual in accordance with Part 3 and meeting needs under Part 4.

B3 Subsections 144A (4) and (5) require that the annual report must be in such form as may be prescribed by regulations and a copy of the published report must be sent to the Welsh Ministers.

B4 Taking each of the requirements listed in paragraph B2 in turn:

<u>S144A(a)(ii)</u>
Codes made under Section 145 of the 2014 Act which relate in some way to the Section 144A report include:

- Part 2 (General Functions) covers partnership arrangements, well-being, and overarching duties
- National Outcomes Framework
- The Performance Improvement Framework and associated guidance
- Part 3 Code (Assessing Needs)
- Part 4 Code (Meeting Needs)

<u>Part 8 Code on the role of the Director of Social Services</u>

Paragraphs 81-90 of the Part 8 Code set out various requirements for the S144A report. The Director must prepare and publish an annual report about the exercise of the council's functions as soon as reasonably practicable after the end of the financial year.

The report must:

- Be presented to the Council by the Director of Social Services and copied to the Welsh Minsters

- Evaluate the performance of the local authority in the delivery of its social services functions

- Set out how the local authority has achieved the six quality standards for well-being set out in a Code made under Part 2 of the 2014 Act and has:

    - promoted the well-being of people needing care and support and carers needing support in the Population Assessment Report for the local authority area
    - assessed and met needs in accordance with Codes made under Parts 3 and 4 of the 2014 Act

- Provide assurances on:

    - Structural arrangements that provide good governance and strong accountability
    - Effective partnership working through regional partnership boards
    - Performance in handling complaints and representations
    - A response to any inspection(s) undertaken in the year
    - An update on the Implementation of “More than Just Words”
    - Explain how the local authority has engaged with people in the production of the annual report

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Appendix C: Good practice in reporting to the public

C1 Local authorities have considerable experience in producing publications and will wish to draw on this if they produce a separate social services report for the public. The following points were distilled from good practice identified in a review of social services annual reports for 2020-21 and a broader review of available literature

C2 The report should reflect what matters to the public and the information they need, which can be ascertained from the views of representative organisations, focus groups, engagement events, complaints, and other representations.

C3 The most important information to the public is often about what services are available, who is eligible for support, how to access it, how long it will take to arrange, and whether there will be a charge for care and support. This may not be suitable for an annual performance report, but the report can direct the reader to where such information can be found and other sources of help and information. Where appropriate, it should also refer to other relevant reports e.g. the section 144A report, and reports of the Regional Partnership Board and the Regional Safeguarding Board.

C4 Style is for local judgment, but a public-facing document needs to be in plain every day, language and jargon-free. Many terms in everyday use in social services and the local authority may be unfamiliar to the public and will also need to be explained.

C5 The report should be concise. People may not be inclined, or have the time, to read a long report. Too much content can obscure key performance and improvement messages.

C6 Acronyms should be avoided. If considered necessary, acronyms should be spelt out in full on the first use, and their meaning explained in full in plain language in the text or in a glossary.

C7 Not everyone with an interest in social services performance can access the internet.

C8 Existing practices of having a range of formats e.g. large print; easy-read, and short video stories are encouraged. The latter can bring a report to life and can be an effective form of communication.

C9 The report should be easy to find on the local authority's website, and web-based versions of the report should be easy for the reader to navigate.

C10 Effective design, including the use of colour, charts, and illustrations, helps readers grasp the key facts and understand performance data.

C11 Anonymised case studies and comments or quotes from the public describing their experience can highlight lived experience.

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Section	Content
Front Cover	FLINTSHIRE COUNTY COUNCIL SOCIAL SERVICES ANNUAL REPORT 2023/24 & 2024/25 Priorities
Contents	Section 1 - Introduction Section 2 – Director's Summary of Performance Section 3 - Context • Leadership • Workforce • Financial Resources Section 4 - Performance Assessment • People • Prevention • Partnership and Integration • Well-being Section 5 – Other information • Inspections and Reviews • Complaints and Representations • Referencing Other Sources of Information Section 6 - Contextual Data and National Performance Measures Section 7 - Accessing Further Information and Key Documents Section 8 - Glossary of Terms A Welsh version of this report is available. If you would like a copy of this report in your own language or in an alternative format such as large print, braille or on tape, please contact 01352 703020.
Introduction	This Social Services Annual Report is prepared under the requirements of the Social Services and Well-being (Wales) Act 2014 and Regulation and Inspection of Social Care (Wales) Act 2016, both of which place a statutory requirement on the Council to report annually on its Social Services functions. The focus of this legislation is on well-being, and our report summarises the key things that we are doing in Flintshire to support our most vulnerable residents. It describes our challenges, provides our stakeholders with a picture of how we have performed and improved over the last year, and sets out our priorities for the coming year. Stakeholders include the people using our services, our staff, elected members, the general public, our partners, regulators and Welsh Government. Engagement with stakeholders is fundamental to what we do and informs the development of our services and future plans. In the report, we assess our performance against each of the four areas in the Performance Improvement Framework – People, Prevention, Partnership and Integration, and Well-being. In each area we will evaluate: **1. What do we know about the quality and impact of what we are doing?** **2. How do we know? e.g. what evidence from research, engagement and the metrics are we using to inform this assessment?**

3. What are we doing well and how can we do better? What are our priorities for improvement, particularly over the coming year.

4. What progress did we make on the areas for improvement identified in last year's report? What difference did we make?

The work described in the report links to the national Quality Standards, which set out Welsh Government's expectations for the quality of support that local authorities must be providing. The standards are set out below:

The Quality Standards			
People	**Prevention**	**Partnerships and Integration**	**Well-Being**
1.1 All people are equal partners who have voice, choice and control over their lives and are able to achieve what matters to them.	2.1 The need for care and support is minimised and the escalation of need is prevented, whilst ensuring that the best possible outcomes for people are achieved.	3.1 Effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people.	4.1 People are protected and safeguarded from abuse and neglect, and any other types of harm.
1.2 Effective leadership is evident at all levels with a highly skilled, well qualified and supported workforce working towards a shared vision.	2.2 Resilience within our communities is promoted and people are supported to fulfil their potential by actively encouraging and supporting people who need care and support, including carers, to learn, develop and participate in society.	3.2 People are encouraged to be involved in the design and delivery of their care and support as equal partners.	4.2 People are supported to actively manage their well-being and make their own informed decisions so that they are able to achieve their full potential and live independently for as long as possible.

There are instances where the work described in this report relates to multiple quality standards, however this will be detailed in the area most appropriate.

Director's Summary of Performance

Welcome to the 2023/24 Annual Social Services Report.

This year, despite the challenges we have faced, we have continued to positively support our most vulnerable residents to have voice, choice, and control over their own lives, reach their potential and live well in their communities.

In November 2023, CIW (Care Inspectorate Wales) undertook a full **Performance Evaluation Inspection of Adults' and Children's services.** This was the first full inspection the portfolio has received in over eight years and provided us with an opportunity to showcase the creative and innovative practice undertaken here in Flintshire.

The report has been published and the findings are largely positive, inspectors identified good work and practice across all services and thanked everyone involved for such a warm welcome and the positive input they experienced.

We consider the report to be a good and positive reflection of the ongoing hard work, commitment and dedication that staff give to their roles on a daily basis, and something we should all be very proud of.

To read the full report please click here.

We are very proud to have had four finalists in this years' Social Care Wales' Accolades Awards**.** The Accolades recognise, celebrate, and share notable work in social care and childcare, play and early years in Wales.

Flintshire Finalists

Category	**Finalist**
Building Bright Futures for Children and Families	Child to Adult Team (C2A)
Effective Leadership Award	Sandra Stacey, Marleyfield House Care Home Manager
Working in Partnership	Micro-Care
Working in Partnership	North Wales Together: Learning Disability Transformation Programme

The awards ceremony was held in Cardiff on 25 April 2024, Sandra Stacey won the Effective Leadership Award, with the remaining nominees being highly commended finalists. Congratulations to all involved for this outstanding achievement.

Developing our **in-house services and capital projects** continue to be a key focus for Flintshire and this is evident in our successes this year, and priorities moving forward into 2024/25.

Some of the other highlights of 2023/24 include:

- **Foster carer** recruitment has been active this year, with four new general foster carers approved and a further eight connected person carers.
- Four of our five new **Children's Residential Homes** have now been registered with CIW. One of the homes includes a Multi Systemic Therapy (MST) model which is the first of its kind in Wales.
- The **Progression Service** has expanded and now also includes a full-time Social Worker dedicated to working with neurodiverse individuals aged 16-18.
- Coleg Cambria held a very successful **Reverse Jobs Fair,** with support from Next Steps, HfT and Deeside Business Forum, to support individuals with disabilities into work.
- This year **Project SEARCH** offered two programmes and became the first Project SEARCH in the UK to offer a dedicated programme for adults aged over 25.
- North Wales Integrated Autism Service (**NWIAS**) have been very proactive this year promoting the service at a number of events throughout the region. Training has been carried out with ASNEW on Autism and Communication Skills and training is also being offered to Advocacy providers.

	• The final design plans for **Tŷ Croes Atti** have been approved and construction work is well underway. To increase capacity for step down care within our in-house provision, 12 step-down **Discharge to Recover and Assess** (D2RA) beds have been agreed at Tŷ Croes Atti, which will increase the provision across Flintshire from its current level of 16 to a total of 28. • The design concept for the **Maes Gwern** has evolved to incorporate areas to enable health services and therapies to be delivered at the new site, in addition to the learning disability, mental health, and autism support services, to create an **integrated social services and health hub**. • This year has been hugely successful for the **Micro-Care** project. 14 new enterprises have been established, taking the total up to 45, and Flintshire are now able to commission support from Micro-Carers. • A **Dementia Project Board** has been established to implement the Flintshire Dementia Strategy. The board includes representation from Social Care, Health and third sector partners. The board has worked collaboratively to oversee a number of positive initiatives this year to engage with individuals impacted by dementia. • We have successfully recommissioned our **Advocacy Services** to ensure individuals are able to understand and communicate their care and support needs and make and/or challenge decisions about their care. The service has also been extended to include specialist advocacy provision for people with autism. • The **Flying Start** programme has been enhanced to offer all two-year-olds part time childcare. To help support the need for additional **childcare** places, the Phase 1 Childcare Capital Programme was completed March 2024, with eight new builds and one refurbishment. • The **Well-being and Recovery Team** are now fully operational and delivering excellent outcomes and the accommodation support element has also been launched. The service is proving very successful, and the feedback received has been positive. • 25 providers across residential, domiciliary and extra care, have now achieved one of three awards (Bronze, Silver and Gold) through our **Progress for Providers** programme. • Uptake continues to increase for our **Young Carers ID Card** with more than 400 young carers now registered. • The Pen-Pal project has been set up to allow **carers** the opportunity to communicate with other carers internationally, to share ideas and provide peer support.
	A Message from Chief Executive, Neal Cockerton: TBC
Context Section	**Leadership** **Who We Are** Elected Members represent the residents of Flintshire and play an important part in the governance of the Council, including agreeing the Council's priorities and approving policies to deliver continuous improvement. Flintshire Council has 67 Elected Members who represent their ward interests and participate in full Council meetings to oversee the performance of all aspects of the Council. One Member is elected by their peers to represent each portfolio area, these are known as Cabinet

	Members, and together with the Leader and Deputy Leaders, Chief Executive Officer and Chief Officers, they form the Council's Cabinet. **How We Make Decisions** Each Cabinet Member is supported by Overview and Scrutiny Committees**,** and for Social Services this is the Health and Social Care Overview and Scrutiny Committee. Because of the close working relationship with the Education and Youth Portfolio, the Council also holds joint Health and Social Care and Education and Youth Scrutiny Committee meetings, to discuss services for children and young people that cut across both Social Services and Education. The Council Leader, Deputy Leaders, and Cabinet Member for Social Services are also involved in the Social Services work programme through the Social Services Programme Board, and the Cabinet Member also attends the Social Services Management Team meetings. The officers of the Council are led by the Chief Executive Officer who is supported by Chief Officers responsible for each of the portfolio areas. The Chief Officer for Social Services has the statutory 'Director of Social Services' role. The Council's structural arrangements for both members and officers are clearly laid out. The constitution details how the Council operates, how decisions are made and the procedures that are followed to make sure that these decisions are efficient, transparent, and accountable to local people. The Council also has its own internal governance through a system of internal audit. The outcomes of audits are monitored by the Audit Committee and officers can be called to give evidence to the committee should concerns be raised regarding their service areas.
	Workforce **Flintshire Recruitment** Recruitment across the social care sector is a challenge nationally, however Flintshire has a number of creative initiatives in place to help drive recruitment. Flintshire commissioned Creed Communications Ltd to undertake a 3-month marketing campaign for social work and occupational therapy recruitment between May and August 2023. To prepare for the campaign, key stakeholders were interviewed to understand Flintshire's unique selling points as an employer and to inform the messaging framework. The Council opted for a recruitment message of 'A Breath of Fresh Air' as a focal point. During the campaign the adverts were seen 550,000 times across various platforms and clicked on 7,000 times. Around 2,000 then clicked to search for jobs on Flintshire's website. Following on from the campaign's success, Flintshire has now brought the initiative in-house and launched their own 'A Breath of Fresh Air' website and Social Services Recruitment webpage. A film was created celebrating the achievements of Social Services to be shown at the Workforce Development Team's award ceremony. The film is entitled 'Social Services – A Breath of Fresh Air' to link in with the existing campaign and continues to be used as a recruitment aid.

	A task group has also been established to look at new and innovative ways to attract applicants for Home Care Worker posts, and a recruitment event was held in March 2024 with more work planned in 2024/25. Flintshire has signed up to the Guaranteed Interview Scheme for individuals who have completed the Taster to Care or Introduction to Social Care. The Taster to Care programme, which was funded up to the end of March 2024, gave individuals a chance to experience working in the care sector first hand through training and a 4-week placement. The WeCare campaign continues to promote the care sector throughout Wales. Flintshire is an active member of the North Wales Regional WeCare group, working closely with local schools and colleges as part of the regional ambassador programme. **Micro-Care** Flintshire's Micro-Care Project is a groundbreaking approach to support people or small business to deliver care and well-being services in the area. Micro-Care has strengthened the local care market by offering a different option for care and support, and by bringing a new source of people into the care market. This year Flintshire has taken advantage of the potential of Micro-Care by utilising it in directly commissioned packages. **Staff Support and Professional Development** As inspectors noted during Flintshire's Performance Evaluation Inspection, there is a stable and experienced Senior Management Team in place across Adults' and Children's Services providing continuity of leadership. Leaders are accessible, approachable, supportive, and overall, ensure practitioners have the right training and skills. Flintshire has a comprehensive supervision policy and practitioners benefit from regular supervision. Flintshire's Workforce Development Team maintain a high standard of training opportunities and offer planned and responsive approaches to supporting the training and development needs of the social care workforce. The team support social work students, staff to undertake AMHP (Approved Mental Health Professional) and Pre-AMHP courses, and also support the Practice Educator Award, thus offering our Social Workers continued professional development and supporting career progression.
Financial resources	**Financial Resources** The **2022/23** budget for Social Services was set at £99.873m, which includes the Children's Services element of £12.281m from the 'Out of County' budget. In **2023/24,** the budget included additional budget for service pressures of £10.073m and provided service efficiencies of £0.283m. For **2024/25** the Social Services budget is set at £106.121m, which includes £13.795m for the Children's Services element of the 'Out of County' budget. This budget includes service pressures of £5.766m and provided service efficiencies of £7.272m.
PERFORMANCE ASSESSMENT	
People	

• All people are equal partners who have voice, choice and control over their lives and are able to achieve what matters to them. • Effective leadership is evident at all levels with a highly skilled well qualified and supported workforce working towards a shared vision.	
People	**Pride of Flintshire** Pride of Flintshire took place in June 2023. This event celebrates the achievements of our children looked after, including an award ceremony hosted by the young people themselves, and a range of fun activities for children of all ages. The event is organised and hosted by Flintshire **Young Voices Speak Out** participation group. The group offers children looked after in Flintshire the chance to have their voices heard, to contribute to developments of the service, give their feedback on policies and procedures within the local authority and attend the Children's Services Forum. The group welcomes guest speakers including the Police, Looked After Children's Nurses and Housing. The group also have a number of days out throughout the year.
	Direct Payments - Local, Regional and National Developments Over the past 12 months Flintshire County Council have continued to play a significant role in the development of direct payments initiatives in Wales. Enabling people to pool their funding creatively to improve outcomes, efficiencies, prevent decline and empower people to work together and build improved resilience. Flintshire's Personal Assistant Recruitment Portal continues to be the only example in Wales. Welsh Government have approached Flintshire and funded its extension to other local authorities, and the team are currently supporting Denbighshire to embed the platform into their systems and practice. Flintshire's direct payment webpages continue to be developed, alongside a range of direct payments resources, public information literature, films, web resources, and safe recruitment processes. Flintshire has given permission for a number of local authorities to adopt the format of the webpages, and resources are shared and available for the benefit of other local authorities in Wales. Most recently, a bilingual animated public information film has been produced by the team, and permission has been granted to Gwent County Council to adopt this for their benefit. Working in partnership with the NW LD Transformation Project, a range of information and tools have been developed to improve understanding of direct payments and their possibilities for adults with learning disabilities. Flintshire are leading on the development of direct payments to support unpaid carers, working in partnership with citizens and local and national carers' organisations. The Direct Payments Support Service continues to develop its local services in response to statutory responsibilities and is accepted as a leading example of direct payments support in Wales. The team have been invited to talk at national conferences and are currently considering utilising I.T to improve opportunities for co-production. Data sets are being developed to both improve and inform how we do things, and this information is shared at a national level.

	The Direct Payments Team Manager is Deputy Chair of the All-Wales Direct Payments Forum, taking a lead on the development of direct payments policy and practice nationally. They are also supporting with a national review into the Personal Assistant workforce in Wales, initiated by Welsh Government on behalf of the Social Care Fair Work Forum. Along with supporting Welsh Government around the wording for the Health and Social Care Bill in relation to direct payments for health care and supporting BCUHB (Betsi Cadwaladr University Health Board) to pilot Individual User Trusts. For more information on direct payments please click here.
	Mwy na Geiriau As a local authority, we recognise that we have a responsibility and a duty as a community leader to promote, support and safeguard the Welsh language for the benefit of present and future generations. Being able to offer services to our most vulnerable residents in their own language, extends far beyond just the words we use, it brings a sense of belonging, connection, familiarity, safety, trust and so much more. Over the past year, many Welsh language celebrations and activities have taken place with the help and support of our community. As part of their 'GOLUD' scheme, the Presbyterian Church of Wales have produced a CD of Welsh medium hymns and readings to support those living with dementia, and this has been shared with our residential care homes. Throughout the year Welsh medium schools continue to visit care homes to sing and perform for residents in Welsh. As part of this year's Menter Iaith Fflint a Wrecsam programme of events for St David's Day, pupils from local schools visited Llys Eleanor, Llys Raddington and Croes Atti to sing, entertain and share the celebrations with residents. The team at Y Dderwen Children's Home, also supported the Welsh language and cultural diversity by celebrating St David's Day. As an employer, Flintshire County Council have embarked on a project to ensure all employees complete their language skills assessment, and, with our colleagues from Iaith, have developed and delivered a new programme called 'Welsh Matters for Everyone', with a follow on for managers called 'Welsh Matters for Managers'. The aim of the programmes is to demonstrate the importance of using the language in the workplace and how to encourage others to do so. Our Workforce Development Team continue to support the 'Mwy na Geiriau' strategic framework and offer staff attending training and completing qualifications or traineeships, the opportunity to access training, workbooks and resources in Welsh, where available. Welsh language assessments are offered to learners at initial assessment, and the 'Mwy na Geriau' framework and 'Active Offer' is included in the taught sessions of both health & social care students and social work trainees, in partnership with the North Wales universities. For employees Flintshire also: • Encourage attendance at Welsh language training and continue to release employees to attend training. • Offer Welsh language taster sessions through Coleg Cambria for employees who do not have any Welsh language skills, (two-hour sessions for a six-week period). • Offer Paned a Sgwrs weekly sessions to provide an opportunity to speak and practice Welsh language skills within an informal and supportive environment during worktime.

	• Identify employees who do not have any Welsh language skills, to ensure they complete the Cymraeg Gwaith/Work Welsh e-learning taster course provided by the National Centre for Learning Welsh.
	Celebrating Social Care academic achievements In October 2023, staff from across Flintshire Social Services celebrated their academic success at a special awards ceremony. Council employees, together with independent care provider employees, were rewarded for their achievements at the event. A wide range of educational awards were celebrated including QCF Health & Social Care, Social Work, Occupational Therapy (OT), as well as other professionally recognised qualifications.
	Workforce Development Team This year has been very busy for our Workforce Development Team. In addition to the awards ceremony, the team have been working hard to ensure we achieve the priorities set for the year, whilst also supporting business as usual. The team continues to maintain a high standard of available training opportunities for our social care workforce, including carers and the independent sector. Consistently offering high quality and quality assured training courses, through a variety of delivery methods, they also work closely with FLVC (Flintshire Local Voluntary Council) and NEWCIS (North East Wales Carers Information Service) to ensure our third sector partners regularly receive information on what is available. Some of the achievements of the Workforce Development Team in 2023/2024: Between 1st April 2023 and 31st March 2024, the team have supported: • **3,493** individuals through the delivery of **334** courses, across the social care sector workforce. • **36** learners to become certificated for the Health & Social Care Core qualification and **1** for the Practice Level 2 qualification. With a further **53** learners currently completing the Level 2 Core, Level 2 Practice, Level 3 Practice or Award in Dementia Level 2. • **37** social work trainees through their traineeship (Open University and Wrexham students). • **4** staff undertaking the 4-year part time OT traineeship via Wrexham university. • **9** Flintshire Social Workers undertaking the Consolidation Award with Bangor university. • **4** staff undertaking the AMHP and Pre AMHP courses. • **6** staff members undertaking the Practice Educator Award. Feedback on training courses • 1220 forms have been completed and returned. • 88% of those said that the course had improved their knowledge. • 97% rated the course 4+. • 97% rated course delivery 4+. • 97% fully met the training objectives. • 96% fully met their personal objectives. **Safeguarding**

	• Promoted the corporate e-learning package for Safeguarding. 906 (80.01%) of social services staff completed the module in 2023/24. • Delivered regular safeguarding training to more than 70 staff working for independent and voluntary sector agencies. • Continued to promote the All-Wales e-learning available via Learning@Wales and Social Care Wales website. **National Safeguarding Standards** • Delivered presentations to support and raise awareness of the national safeguarding standards. • Developed a safeguarding training programme (due to be finalised April 2024), to ensure Flintshire Social Services are offering training adequately aligned to the safeguarding standards. **Digital Skills** • Further improved the digital skills of the workforce through offering digital skills and awareness courses. • Advertised the training courses offered by Digital Communities Wales through Coleg Cambria. • Actively promoted Flintshire's Digital Hub - a team member currently volunteers as a member of the Digital Squad. • The team are members of the regional and Digital Communication groups, chaired by Digital Communities Wales. • Sessions held include Digital tools for translation, Digital tools for dementia, Digital smart speakers - How to use a digital smart speaker to enhance health and well-being. **Other areas** • Developed the **North Wales Local Family Justice Board Training sub-group.** Membership across partner agencies has been secured and meetings are taking place. • Continued to support the ongoing work around **recruitment and retention** of social care staff by offering quality training, together with support for qualifications and traineeships, ensuring that staff feel confident in their roles and continued professional development. • Continued to support the **WeCare campaign** and attended the Eisteddfod to support the recruitment agenda. • Established a rolling programme of training for Flintshire's Learning Disability Services on Positive Behaviour Techniques (**RESPECT**), delivered by qualified and accredited in-house staff. In 2023/24, 28 staff completed this training and a further 10 staff completed a refresher course. • Supported staff to access a 12-week foundation programme as an introduction into the work of an OT at Wrexham University. Supported staff interested in progressing into the role of Social Worker, by offering a series of foundation modules via the Open University. • Supported the work undertaken by the **Early Years Pathfinder**. Working towards a skilled and confident workforce, and a training and competency-based development plan for roles within the early years system, which has strengthened co-production and effective use of resources.
	WeCare Wales

	This year Flintshire represented WeCare Wales at careers events in Plas Derwen, Holywell, Elfed High School, Buckley, and Hawarden High School. We are also recruiting more WeCare ambassadors, to be able to reach more young people and educate them about the different career options and progression opportunities within the sector. Flintshire is also registered with the Guaranteed Interview Scheme for individuals who complete WeCare Wales' Introduction to Social Care course.
	2024/25 Priorities • Direct payments: lead on direct payments initiatives at a National Level • Flintshire County Council to sign the pledge and adopt Welsh Government's 'Corporate Parenting Charter: A Promise for Wales'. To fully support the principles and promises set out in the Charter, and ensure our Children Looked After receive the highest standard of care and support. • Pilot the workforce development skills matrix to ensure staff deliver quality and effective services. To include speech, language and communication, parenting, childcare and transformation as a minimum (Early Years & Family Support). • Support the implementation of the All-Wales safeguarding standards through delivery of a training programme which aligns to the competency groups within the national training framework. • Continue to support the Digital Strategy by supporting the improvement of digital skills of our workforce. • Maintain a high standard of available training and development opportunities for our social care workforce, including carers and the independent sector. • Work with our regional partners, ensuring Flintshire are involved in the implementation of policies and training offers. • Support the implementation of training and information from identified areas through the Single Unified Safeguarding Review (SUSR) process and CIW Inspection. • Support the WeCare Campaign and the work around recruitment and retention of social care staff. • We will remain committed to supporting the 'Mwy na Geiriau' strategic framework by ensuring we are able to offer training and resources bilingually when required. • Support staff and students with a pathway into social work and occupational therapy. • Continue to deliver the Health & Social Care Core Level 2 and 3 Practice qualifications via our assessment centre, providing necessary qualifications for our support staff working in Adult Services.

	• We will continue to work with universities and support trainee Social Workers through their 3-year traineeship and offer help to our occupational therapy staff undertaking their traineeship. • We will continue to support both social work qualifying training, and post qualifying training in Wales, including the first 3-years framework requirements for all post-qualifying Social Workers new into roles.

Prevention

- The need for care and support is minimised and the escalation of need is prevented whilst ensuring that the best outcomes for people are achieved.

- Resilience within communities is promoted and people are supported to fulfil their potential by actively supporting people who need care and/or support including carers to learn develop and participate in society.

Prevention	**Early Years and Childcare** In line with the local authority statutory duty to ensure sufficient childcare places in Flintshire, several key initiatives are progressing, as well as the development of Welsh Government programmes. The Flying Start programme has been enhanced to offer all 2-year-olds part time childcare. This is a phased expansion, Phase 1 has been implemented and Phase 2 is currently being rolled out across Flintshire based on Welsh Government criteria, with an additional 23 children for 2024-2025. We are continuing to work towards seamless pathways for 2-year-old childcare, 3-year-old childcare offer, and early pre-school education provision, as well as ensuring the quality of childcare, for children with additional needs or vulnerability. To help support the need for additional childcare places, and to create seamless pathways for children between childcare and education, the Phase 1 Childcare Capital programme was completed in March 2024. With eight new builds and one refurbishment, it is operating alongside the Phase 2 Childcare Capital Programme. In collaboration with Education and the childcare sector, addressing the needs in the Childcare Sufficiency Assessment, four Business Cases were submitted to Welsh Government for 2022-2025, and two have begun their feasibility survey. The new modular buildings will create an additional 50-60 additional childcare places available in Flintshire. The Small Capital Grant from Welsh Government continues into 2024-25, and has been an extremely successful programme, making a difference to the childcare environment across Flintshire. Work is ongoing towards the development of a national, regional, and local approach to Early Years Transformation, so that all our children aged 0-7 have the best possible start in life and can reach their full potential. There has been significant benefit and system change due to partnership collaboration locally, regionally, and nationally, which is benefiting families. The work to date, including piloting and testing innovative practice, will support Welsh Government in making further policy decisions across the sectors and spectrum of need, to ensure effective outcomes for all children and longer-term health and well-being outcomes.

	Flintshire will work with a small advisory group from across Wales to progress thinking and policy direction at a national level. A draft Early Years Strategy has been completed. However, following notification of the closure of the Early Years Pathfinder funding, this is due to be reviewed by the Flintshire Early Years Board and Regional Partnership in 2024 to agree the way forward, including the prioritisation of existing projects, for example, parent and infant relationships, Brain Story and resilience. The priorities set out in the Early Years Strategy have been developed and the strategic direction is planned in accordance with 4 workstreams: **1. Evidence Based Interventions, Identifying Needs and Achieving Outcomes** We aim to achieve wide collective ownership of the strategy and vision, for all children to have the best start in life. Work around the population data is developing and a baseline established. Areas being explored are shared information between the region, local authority and health, for example live birth data. A clearer understanding of the early years' population and the Nesta Cymru report has been helpful to enhance our business intelligence and support key areas of work, such as the Flying Start expansion. Work is progressing towards a clear narrative of child outcomes at key life course points, such as birth, entry to learning and entry to school, and for vulnerable and complex needs population groups. **2. Workforce Planning and Practice Development** The Workforce Strategy for early years is near completion and is planned to be finalised in April 2024. Working in collaboration with the University of Oxford, the 'Brain Story' has been piloted and tested across all regions in North Wales. Evaluation information was presented to the Early Years Integration and Transformation regional meeting in January 2024. The evaluation was well received, and the training will be expanded upon over the next year. **3. Creating Accessible and Inclusive Services, Co-production, and Service User Engagement** Empowering Parents, Empowering Communities (EPEC) the parent volunteer programme is still delivering a high level of positive feedback for the core programmes. An additional autism module was piloted between September 2023 – March 2024, which showed increased confidence in parenting, improved relationships and stronger parent networks established as peer support. Parent Champions commenced with a small number of volunteers trained to deliver parents' information in their local community. This will help to centralise information for the public and allow for a more effective approach to signposting information. The inclusion and engagement framework continues to develop, to ensure the voice of the child and parent influences the system. One of the big successes developed with parents is the new Early Year and Childcare webpage, working with Health and their development of Best Start Hub. **4. Integrated Pathways and Transition Points** There are several Task and Finish Groups working towards further developing the system, for example, a pre-school pathway working group has been established to create seamless pathways through childcare to education, and to ensure children with needs are supported on this journey**.** Some of this work has now moved into business as usual due to its positive impact, for example speech and language within Education,

	and Video Interactive Guidance and Circle of Security working with CAMHS (Child and Adolescent Mental Health Services).
	Special Guardianship Service The Special Guardianship Service has continued to develop this year, staff capacity has increased and there has been an increase in the demand for SGO's (Special Guardianship Order's) via Children's First Contact Team. There have been a number of developments in the service including: • A Special Guardianship Support Group has been launched online. • The first support group coffee morning and walk has been held which was a success, moving forward these will be held 3 monthly. • SGO webpage has been created on the Council's website, which is easily accessible and contains a contact form which directs queries to a dedicated SGO inbox. • Newsletters are now sent out to all Special Guardians three times a year, which helps open communication when the team are no longer supporting. • Regular information is sent out using the SGO support inbox, to signpost individuals to relevant events, activities, and support within the local area. • Nurturing attachments training, including training on online safety, is being run every 3 months for Special Guardians. • Educating colleagues around Special Guardianship to help enable an SGO to be identified earlier and reduce the number of Children Looked After. • Working closely with AKFA Cymru (Association for Fostering, Kinship and Adoption) to develop SGO support services across Wales.
	Multi Systemic Therapy Multi Systemic Therapy (MST) is a short-term, intensive way of working with families when the young person in the family is getting in trouble at school, at home or with the police. The MST Team has worked with 134 families across Flintshire and Wrexham since May 2020. From 1 April 2023 to 31 March 2024 the team closed 45 families completing full treatment. During this period, 93.33% of the young people remained at home, 80% were in education, employment, or training and 91.11% had no new arrests.
	Expansion of the Progression Team The Progression Model continues to be expanded across services to promote people's independence skills and to support them to achieve their personal outcomes. The Progression Team is being strengthened to enable a focus on employment with additional posts being created, to enable the team to expand the service offering for employment and work opportunities for individuals with disabilities. Since January 2024, there is a full-time Social Worker dedicated to working with neurodiverse individuals aged 16-18, ensuring support and guidance is provided to enable the individual to be independent of formal support going forward. The Social Worker links in with the IAS (Integrated Autism Service) team and other local services to ensure the individual is aware of all support available in their area. They have developed networks to enable collaborative working to ensure individuals are able to achieve what matters most to them. The support is measured using the Bench Marking

	Assessment form devised by the Progression Service, which tracks progression made from entering the service (benchmark) over a 6–12-month period and can be used as a visual aid that both the Social Worker and individual complete together. A further development is the appointment of a Supported Employment Co-ordinator in March 2024, funded by the Transformation Grant. They will be working with the Learning Disability Team, contributing to the review process to identify opportunities for those who express an interest in paid employment.
	Project SEARCH Project SEARCH is an international internship programme for individuals with learning disabilities, neurodiversity and/or autism. Flintshire County Council has proudly supported the project since its launch in 2019 in partnership with HfT, and more recently BCUHB. The last 12 months have been an exciting time for the local Project SEARCH programme in terms of innovation and development of the local service offering. Within Flintshire, the programme expanded to offer two distinct programmes and became the first Project SEARCH scheme in the UK to offer a dedicated programme for adults aged over 25. The expansion of the local service offering to running two schemes has proven to be a real success and has resulted in two graduation ceremonies being held for students to celebrate completing their internships with their family and friends.
	Supporting Individuals with Disabilities into Work A partnership between Flintshire County Council, HfT and Deeside Business Forum has been formed to support individuals with mental health issues, neurodiversity and learning disabilities, to secure paid employment in their local community. In February 2024, a reverse jobs fair was held at Coleg Cambria, with support from Next Steps and HfT. The event was well attended by over 50 individuals and organisations. Following on from the event, one individual has been approached regarding paid employment, and another individual is setting up their own business with support from Big Ideas Wales. As a result of the event's success, Next steps and HfT are planning to organise another Reverse Jobs Fair in October 2024. The 'EmployAbility Hub' has also been launched on the Deeside Business Forum website, which lists all the supported individuals who are seeking paid employment.
	Next Steps Next Steps ran a career planning course in partnership with Adult Learning Wales in May 2023. The course covered career options, how to write a CV, what to wear for interview and an action plan on the steps to take to be ready for employment. Next Steps worked with the Deeside Business Forum and Kings Academy to provide the learners with work experience and 'real life' interview practice. Eight learners started the course and six completed it, gaining an Award in Work Related Education qualification. Outcomes for those individuals included: • 2 individuals secured paid employment. • 1 individual is working towards becoming self-employed. • 1 individual started an accountancy training course.

	• 2 individuals started volunteering to gain experience, structure and routine to their week, both are now actively seeking paid employment.
	Supporting Carers Unpaid carers are a vital source of care and support for many individuals throughout Flintshire, relieving the pressure on formal care services significantly. The valuable impact of unpaid carers to individuals and communities in Flintshire cannot be underestimated. **Young Carers** Engagement and uptake for our Young Carer ID Card continues to increase, with more than 400 young carers now registered with the scheme across Flintshire. Work is also ongoing with colleagues in Education to increase awareness of young carers within schools through an accreditation scheme of training sessions for staff and links with NEWCIS. Ensuring they are able to identify young carers and support them with their education and any further support needs they might have. Not only is awareness being raised amongst staff in schools, but also throughout the school community with pupils learning about young carers, what some of their responsibilities could entail and what they can do to support each other. This awareness raising has been very successful, and this year the pupils at the Alun School in Mold voted to support NEWCIS Young Carers as their charity of the year. The money raised by the school will be spent on additional tuition for those who feel they need it leading up to their exams. **Breaks for Carers** The range of options available through our award winning 'Bridging the Gap' scheme are now larger than ever, ensuring carers have the choice and control for a break that matters to them and meets their outcomes. Building on the success of 'Bridging the Gap', Flintshire launched a programme of direct payments for carers, in partnership with NEWCIS. Since the launch of the new scheme, we have seen an incredibly positive response with 48 carers being supported so far. Carers reported that the direct payment scheme contributed positively towards their well-being and that of the cared for. Carers felt that they were able to sustain their caring role and maintain supporting their cared for to continue living at home. Our partner organisations have also shown great interest in the scheme and are feeding back that the carers they support believe this would be a significant help to them. Internally our Social Workers are seeing the incredible benefits of supporting carers to be creative in sourcing the support they need to sustain their caring role. Since the scheme began, it is evident the ability for the carer to be creative in finding solutions to meet their outcomes, are far more cost and resource effective than the prescribed solutions available. The 'Amser' Scheme has enabled us to support our third sector partners with applications for funding to deliver a number of different options for our carers to access breaks, ranging from hotel breaks to a meal out, or even a hobby that can be pursued from home.

	Our young carers have been able to access camping trips and wilderness activities. The new 'Break Shop' created by young carers, provides items such as games and sports equipment to use at the group, and then take home to play with siblings and other family members. **Cost of Living Crisis** To support carers with heating costs, NEWCIS has a number of Winter Warm boxes available which include radiator reflectors, window film and items of warm clothing and fleece blankets. NEWCIS has also gained funding to buy electric throws, which also helps to keep the heating turned down. Courses are being arranged with Scottish Power and CAB which will support carers with high energy costs. The courses look at energy saving methods and the financial help that is available to carers. Carers attending previous sessions advised the courses were very beneficial. Carers told us they learnt a lot and it would help them to reduce their bills in the future. **International Network of Carers** The pen-pal project has been created to allow carers the opportunity to communicate, share ideas, collaborate, provide peer support and respite opportunities. The project has got off to a great start, with carers being matched with centres in Cheshire, Scotland, Australia and America. Carers are matched by age and interest, and we have received 51 referrals since we began in August 2023. Carers have requested some groups be held over zoom, so they can chat about their different areas and see each other face to face. **Re-commissioning of our Carer's Services for 2025 onwards** Work is in progress to review our current commissioned services to understand what is working and where there may be gaps we need to fill to support our carers. We are working to ensure what will be commissioned is co-produced with carers themselves, ensuring that they have input into the services available.
	2024/25 Priorities • Continue to grow our in-house fostering service to support more children looked after. • Continue to develop the Special Guardianship Service to reduce the need for children and young people to remain looked after. • Develop childcare expansion and seamless childcare provision across programs. Achieve the childcare expansion target set by Welsh Government for the 2-year-old phase, Flying Start, Flying Start Outreach and 3–4-year-old childcare and additional support and continue the childcare capital programmes. • Develop a national, regional, and local approach to Early Years Transformation so that all our children ages 0-7 have the best possible start in life and are able to reach their full potential. • To include a regional approach to early years brain science through simple messages, metaphors, storytelling, and training - Oxford Brain Story.

	• Pilot an evidence-based volunteer information provision to increase access and availability of information to support families and provide early intervention and prevention. • Utilise the progression model as a way of promoting people's independence skills. • Continue to expand the service offering for employment opportunities for disabled people. • Progress the newly formed partnership with Deeside Industrial Park which aims to bring employment opportunities for vulnerable people within Social Services. • Continue to meet the demands of young people with learning disabilities for accommodation. • Further development of our work to support young carers in their role, including but not limited to: further development of the Young Carers ID Card, focus on respite and breaks for young carers, engagement with education colleagues and schools, engagement with businesses and communities across Flintshire, support with training and education opportunities. • Continue to investigate and expend creative respite solutions to meet the needs of carers in bespoke and unique ways.

Partnership and Integration

- Effective partnerships are in place to commission and fully deliver fully integrated, high quality sustainable outcomes for people.
- People are encouraged to be involved in the design and delivery of their care and support as equal partners.

Partnership and Integration	**Welsh Government Officers Visit Flintshire** In November 2023, Flintshire had a great opportunity to showcase just a few of the innovative practices and projects we are all very proud of when we received a visit from Albert Heaney CBE, Chief Social Care Officer for Wales, and Taryn Stephens, Deputy Director Improvement, Social Services and Integration Directorate at Welsh Government. Albert and Taryn visited Marleyfield House Care Home where they met Foster Bear and learnt about the Mockingbird project in Fostering. Albert and Taryn also had a tour of Cyflawni at Marleyfield House, learnt about D2RA pathways and were given a virtual tour of the plans for we have in place for Tŷ Croes Atti, our new care home in Flint to replace the existing Croes Atti Care Home. Two Flintshire Micro-Carers, Rachel Jones and Yvette Mallalieu were also present to share with Albert and Taryn their experiences of being Micro-Carers and how they support Flintshire residents and their families.
	Tŷ Croes Atti Care Home

	Flintshire County Council have approved the final design plans for a new 56-bedroom residential care home in Flint, which is being built on the site of the former Flint Cottage Hospital. Construction work is well underway, and we anticipate the development will be completed by the end of May 2025. The project involves the relocation and expansion of the current 31 bed care home in Flint to the new site. Working in partnership with BCUHB, the facility will provide integrated social care and health care services and offer residential care of the highest quality using state of the art facilities across four floors. One of these floors will provide D2RA support to approximately 12 residents at any one time, providing short term care that supports the reablement and recovery of residents following a period in hospital or other identified needs. The project has a value of approximately £18 million and has received just over £11 million in funding via the Welsh Government's Integration and Rebalancing Capital Fund (IRCF) and Housing with Care Fund (HCF) capital programmes. The remaining funds are being provided by Flintshire County Council's capital programme. **Maes Gwern Integrated Social Services and Health Hub** The development of Maes Gwern will see the existing supported employment projects at Tri Ffordd in Bretton, and Growing Places in Shotton, relocate to Mold. The original design concept for the Maes Gwern hub has progressed to include areas to enable health services and therapies to be delivered at the site, to create an integrated social services and health hub. The business case for Welsh Government Integration and Rebalancing Care Fund (IRCF) was reconsidered and received conditional approval in September, with Ministerial approval for the full amount of funding requested (£2.9 million) being received in November 2023. The remaining £1.8 million will be funded from the Council's capital programme. The RIBA Stage 4 design has been completed and construction is due to start in April 2024. The new purpose-built facility will provide sustainable, high-quality services, working in partnership with HfT and BCUHB, to provide health services and therapies, in addition to learning disability, mental health and autism support services. The build for the project is estimated to be 12-months and the projected opening date for the facility is April 2025.
	Flintshire receives membership from the World Health Organisation Flintshire has received the accolade of becoming a member of the Global Network of Age-friendly Cities and Communities. Established by the World Health Organisation (WHO) in 2010, the Age-friendly network connects cities, communities, and organisations across the world with a shared vision of making their communities a great place to grow older. Flintshire joins more than 1,400 cities, counties, and communities across 51 countries around the world in being recognised as working to improve the age-friendliness in their area. As the second community in Wales to achieve membership, along with the city of Cardiff, this supports Welsh Government's vision for Wales to be an age friendly nation, where people of all ages are supported to live and age well and can participate in their community.

	For more information about 'Age Friendly Flintshire', please click here.
	Flintshire Dementia Strategy and Dementia Project Board Flintshire County Council, supported by BCUHB, developed a Dementia Strategy for Flintshire in 2020. An update was published in November 2021 which can be accessed on Flintshire's website, along with a range of information about support services and community activities for people living with dementia and their carers. The Flintshire Strategy is aligned to the North Wales Dementia Strategy and All Wales Dementia Care Pathway of Standards. A Dementia Project Board has been established to implement this strategy. The Board includes representation from Social Care, Health and third sector service partners, who work collaboratively to engage with people impacted by dementia, to ensure that local needs and priorities are met and that communities are inclusive and supportive. The Board has overseen a number of positive initiatives and projects in the last year. These include: • A new North Wales Dementia Friendly Community scheme. • A community listening campaign and community engagement event in Mold. • Person centred support provided by the Dementia Support Workers, Social Workers, and Occupational Therapists. • Specialist workers across Social Services and Health working to share skills to support younger people with dementia, and those with an early onset diagnosis. • Support to unpaid carers and engagement with communities, led by NEWCIS. • Dedicated dementia lead within the Workforce Development Team, developing the knowledge and expertise of Social Services staff and care provider teams. • The Progress for Providers accreditation programme for care providers supporting people living with dementia. • Investment in promotion of North Wales Police Service's 'Herbert Protocol', helping to support the service to locate missing persons who are living with dementia. • Community-based therapy services, working in close collaboration with Social Services to provide post diagnosis support. • Memory Support Pathways and the Flintshire Dementia Centre, delivering positive outcomes for pre and post diagnosis support to people living with dementia and unpaid carers and families. • Additional equipment and resources provided, including dementia friendly radio sets and robotic therapy pets for extra care tenants and care home residents.
	Micro-Care 2023/24 has been a hugely successful year for the Micro-Care project in Flintshire. 14 new Micro-Enterprises have been established, taking the overall number of providers delivering social care and support up to 45. These Micro-Carers have supported around 200 people in Flintshire across the last financial year, and with a new cohort of businesses coming through, this number is expected to grow. Flintshire has supported a Micro-Care provider to setup as a day service for people with dementia in the community, running out of two separate locations to cater for demand in different areas. 14 people now attend this service, providing valuable respite services and outcome focused interventions for people with dementia in Flintshire.

	A major step for Micro-Care has been the ability to commission the enterprises to deliver personal care for those most in need. This has worked successfully, with 5 Micro-Carers being commissioned in Flintshire across the year. The outcomes from these services have been exceptional, with Micro-Carers being able to deliver flexible services that adapt to an individual's outcomes. This year we celebrated the positive work undertaken by Micro-Care at a celebration event attended by over 40 people, the majority being Micro-Carers and individuals they support. The Council were able to express their gratitude and hear about the positive work undertaken in the community, and the successes people have made from setting up their own micro-enterprises. The project was also nominated for a Social Care Wales Accolade award and shortlisted as a finalist. Many Micro-Carers met the judges and portrayed passionately the value of Micro-Care as part of the social care sector and what it has meant to them personally. We are very proud that Micro-Care has gained recognition as a highly commended finalist. To find more about becoming a Micro-Carer, or to find more about services they offer, please click here.
	Progress for Providers Progress for Providers is an accreditation programme that sets out clear expectations about the delivery of individualised care for residential and domiciliary care providers in Flintshire. It uses person-centred tools and practices to help staff teams change the way they support people and engage with families. Progress for Providers promotes staff development and enables people receiving care and support to have more choice and control by focussing on what matters most to them. Having embedded these tools in their service delivery, 25 providers have achieved one of three awards (Bronze, Silver and Gold). Providers have also been adapting the tools to work for them and find they are learning more about the individuals they support, allowing them to provide better care. **Examples of the impact from working with Progress for Providers:** **The Oaks** (Silver) has fully embraced the tools, and by working with family to understand the life history of the people they support, are able to bring to life the person they were previously, and not simply seeing who they are now. They also utilise the Decision-Making Agreement, which contains lots of person-centred and detailed information around decisions that are important to people and how they would like to be involved in those decisions, ensuring they feel in control of their life. **Castell Ventures** (Silver) support residents with learning disabilities and have adapted their recruitment strategy to include the One Page Profile. By asking each candidate to complete a profile before their interview, they can ensure there will be compatibility between the successful candidate and the individuals they will be supporting. **Wellfield** (Gold) have displayed outstanding documentation and it is evident that person centred care is a priority for the home. It is embedded into practice and documentation and appears to be at the heart of everything they do.

	Plas Yr Ywen (Gold) have fully embedded Progress for Providers into their services, for example, a tenant had a stroke in 2016 which left them with cognitive difficulties including significant communication issues and trouble with word finding. The tenant likes to complete jigsaws but was getting frustrated because they couldn't recall which staff member had supported them. From completing the learning log and reflecting on what worked well and what didn't work well, a team member suggested putting the mini profiles with staff names and photographs in the tenant's apartment to help remind them. It is also important for the tenant to have their hair styled after a shower, meaning it is important the person who supports with the shower is capable and confident in styling hair. This person-centred, important information is captured on the matching support tool. **Marleyfield House (Gold)** not only does the Progress for Providers programme have an impact on the care and well-being of residents, but staff members can also benefit from the use of the person-centred tools. For example, Marleyfield House supports a diverse level of care needs ranging from residential, reablement, short term care and residents living with dementia. Using the 4 plus 1 Questions tool, management were able to ascertain that for residents living with dementia, or a dementia related illness, it is vital that staff need to be supported with more knowledge at the early stages, to prevent misinterpretation of the effects of dementia, and see the person not the illness. To support staff members, a Dementia Training File was introduced with easy-to-follow guidelines provided by the Alzheimer's Society, to assist with supporting residents and families on the main forms of dementia, along with end-of-life care. Team meetings, group discussions and reflective practices continue to be held to implement the guidance. To see the full list of providers achieving these awards click here.
	Advocacy Services Our advocacy services have been re-tendered from January 2024. We have joined with Wrexham County Borough Council as part of this tender process to create a new North-East Wales advocacy offer. Previously there were two providers in Flintshire, and an alternative in Wrexham, and feedback was that accessing advocacy could at times be confusing. Now people looking for advocacy support can call one provider for all services, Advocacy Services North-East Wales (ASNEW). The new sub-regional service is still in its infancy but has already supported 163 advocacy cases in its first quarter. We have also re-tendered our Self Advocacy project and Advance Brighter Futures now deliver this in Flintshire and Wrexham. This has given the opportunity for a fresh new look at how services empower people to advocate for themselves and prevent the need to seek statutory advocacy support in the future. Advance Brighter Futures have set out to re-evaluate the existing provision in Flintshire and codesign and relaunch a brand-new service in April 2024.
	Disability and Sensory Loss Services Following a successful tender exercise, Flintshire, in partnership with Wrexham Council, have retendered the sensory support services with Vision Support and DSN**.** The services will be delivered on a sub-regional footprint to offer efficiencies and better capacity management in the area. The new contracts are due to start on the 1st of May 2024, and we are looking forward to working together with both Wrexham and partners in providing a high-quality service.

	Autism Services North Wales Integrated Autism Service (NWIAS) has been very active this year, promoting the service and ensuring individuals with autism in North Wales get the support they need. NWIAS now have a regular programme of advice hubs in all six counties of North Wales. These are run on a monthly basis in public venues which facilitate access to information and support. The team also run post assessment support in terms of six-week support groups to enable neurodivergent individuals to gain coping skills. Promotional days have been held at Ewloe Sports and Social Club, Flintshire, The Imperial Hotel, Llandudno and Oriel House Hotel, St Asaph, which have been successful in attracting more than 350 people. 71 organisations were showcased at these events who were able to offer support to attendees, both individuals and families. There were also opportunities for networking between organisations and all events have been well received. More events are planned for 2024/2025 in Anglesey and Wrexham. NWIAS also had a stall at the Flint and Denbigh show which attracted more than 80 personal enquiries, enabling us to reach even more individuals. Training has been carried out with ASNEW on Autism Awareness and Communication Skills, and NWIAS actively promote Autism Wales' online learning on this subject which has led to increased publicity and access for both professionals and the public. Training is also offered to advocacy providers and contracts now detail expectations around skills and knowledge in supporting autistic people. NWIAS has been successful in obtaining Welsh Government funding through their Neurodiverse Improvement programme to fund additional autism spectrum disorder (ASD) assessments to reduce the waiting list which stood at 21 months. NWIAS has undertaken research in conjunction with Bangor University in relation to customer satisfaction, and together with specialist staff in Flintshire Council, have developed an online survey satisfaction tool. This tool is used to monitor the performance of the service and will be reviewed on a quarterly basis to improve performance. The team also ensure they receive regular feedback for groupwork that is carried out, to be able to continue to co-produce the courses to ensure inclusion with the autistic community. NWIAS has also developed a new consultation model for professionals requesting input from the service, to develop professional autism practice and to assist in case management of autistic adults. This has been well received and the team have been able to support the Community Mental Health Teams (CMHT), the Eating Disorder Service and Substance Misuse Services to develop practice in relation to autism assessments. The clinicians also participate in multiagency meetings to give advice in relation to complex casework.
	Mental Health Services During 2023/24, Social Services have further developed preventative and early intervention services for people struggling with their mental well-being in an effort to avoid the need for statutory services. In addition to commissioning support from FLVC for social prescribing services within the CMHT, the Well-being and Recovery Team now have three Social Workers providing the following services:

- Children and Families Well-being Worker – this role offers information and guidance to people who are struggling with their mental well-being and have dependents who are children. Parents can be signposted to mental health resources in the Flintshire area.

- Adults Well-being Worker – this role offers information and guidance to people who are struggling with their mental well-being and may be having difficulties finding the support they need. They are based in the Flint Library Hub on Fridays between 12pm and 2pm. This worker also works in conjunction with NEWMind to facilitate a peer led support group for those experiencing issues associated with personality disorder. This was included as an example of good practice in a recent ITV Wales documentary.

- Well-being Accommodation Support Worker - this role provides support to people who are struggling with their mental well-being and may be at risk of losing their homes as a result.

In September 2023 the Well-being and Recovery Team launched its Accommodation Support element, which consists of one Social Worker and two Support Workers. This new team was developed using Housing Support Grant funding to respond to the housing issues being experienced by people with lower-level mental health problems and/or substance misuse issues. Difficulties include financial problems leading to non-payment of rent, relationship breakdowns leading to homelessness, hoarding behaviours, and a range of other housing needs. Staff in the housing departments felt they lacked knowledge and expertise in working with people with mental health and substance misuse issues and were finding it difficult to address housing problems where these were the underlying causes. The Well-being Accommodation Support Team has been set up using agreed processes with housing teams, and referrals can be made by any individual or professional via the Flintshire Housing Gateway website.

The feedback from the project has been positive, communication between the Well-being and Recovery Team and the Housing Solutions Team has been good and they have embedded themselves well.

The number of referrals has tripled from 12 units of support to 47, which has resulted in individuals being able to access mental health services who previously would have not been able to. The addition of the Well-being and Recovery team has meant that individuals have benefited from a Social Worker's input to ensure they are referred to and access the relevant services. Individuals are now receiving professional advice and assistance from a specialist team.

Housing Solutions Officers have fed back that individuals are engaging well with the Well-being and Recovery Workers. The waiting list for support from mental health services within HSG has decreased, and the Well-being and Recovery Team currently have 35 cases between them.

For more information about the Mental Health Services available please click here.

2024/25 Priorities

- Provide additional placements for step down care within our in-house provision (Tŷ Croes Atti).

	• Support the building of a new hub for the relocation of Tri Ffordd supported employment project to Maes Gwern in Mold. • Continue to grow the Micro-Care market, including access to commissioned care packages. • Pilot an evidence-based volunteer parenting programme, offering parents an opportunity for peer-to-peer support and to test whether volunteer services are as effective as paid services. • Investigate how to identify and connect with more carers, make our services more visible and accessible and raise awareness of carers in the local community. • Recommissioning of carers services to begin in April 2025.

Well-being

- People are protected and safeguarded from abuse and neglect and any other types of harm.
- People are supported to actively manage their well-being and make their own decisions so that they are able to achieve their full potential and live independently for as long as possible.

Well-being	**Fostering** **Foster Bear Campaign Success Story** The Foster Bear campaign was launched in January 2023 in collaboration with Primary Schools across Flintshire to raise awareness of local authority fostering and outline the urgency to recruit more foster carers in the county. So far, thirteen primary schools have welcomed Foster Bear into their classrooms, and children are given an activity pack that contains a Foster Bear teddy and activity book to take home. The campaign educates children and their families about local authority fostering and the benefits of children looked after staying local. **Foster Bear's First Birthday** Foster Wales Flintshire hosted a very special birthday party in February 2024, to celebrate a year since the launch of their innovative Foster Bear campaign. Local foster carers and children were invited to attend the party to play games, create crafts and celebrate Foster Bear's first birthday. **Raising Awareness** In support of the Foster Wales national campaign 'Bring Something to the Table', the Flintshire Foster Wales Team were at Broughton Shopping Park on a number of dates throughout January and February to raise awareness, educate people about fostering with Flintshire, and answer any questions. **Mockingbird** The Mockingbird programme replicates an extended family in constellations of 6-10 fostering households, led by a Hub Home Carer and Liaison Worker. The constellation

	community offers vital peer support and guidance alongside social activities and sleepovers, to strengthen relationships and permanence for children and young people. There are currently three constellations in Flintshire, all of which are going well with lovely friendships and relationships. This year we have seen multiple instances of foster carers increasing their capacity, either from respite carer to fulltime, or from one placement to two placements, due to the confidence they have gained from the Mockingbird programme. Another positive outcome that we have experienced this year is a case where a child who would have been placed in an out of county residential placement, has been able to stay in foster care in Flintshire alongside their siblings.
	Children's Residential Homes Flintshire's commitment to developing a programme of Children's homes to help avoid the need for residential placements outside of the county is ongoing. Over the last 12 months, we have been successful in registering 4 of our 5 new Childrens Residential Homes with CIW. The team in Tŷ Nyth have opened a model of Multi Systemic Therapy, Family Integrated Treatment, Integrated Treatment Model (MST FIT ITM), which is an evidence-based model that is widely used throughout America and is the first of its kind in Wales. The team have regular monitoring meetings with the consultants from MST, have clear documentation in place to support with the quality of the service delivery, and the home's Responsible Individual visits regularly to complete monitoring visits, in line with the regulation requirements. In December 2023, the team celebrated the first young person moving back to live with their family full time. The young person had been in care for 9 years, has now finished the full programme, been closed to the MST FIT team, and continues to live together with family. Following on from this success, another young person has since moved home to family and another young person is currently in the programme. The team members within the service have supported Children's Services with emergency situations, and have supported young people in their family homes, within Flintshire's emergency provision, as well as within other properties in the local community. The teams have been embedding evidence based therapeutic approaches within all the homes, and further training is booked this year which will support the development of this. There is a psychologist working closely with the service which has been key in supporting the workforce to develop their skills, improving practice, and understanding the young people and how we can best support them.
	Long-term Accommodation for Young People with Learning Disabilities Flintshire continues its work to meet the demands of accommodation for young people with learning disabilities. Progress is ongoing and good links have been made with the Housing Associations.
	Short-term Emergency Accommodation Flintshire now have four properties available to support people who find themselves homeless, or in need of accommodation urgently. The most recent addition is a bedsit which has been used to accommodate a young person with autism who was at risk of homelessness.

	The Progression Service have supported this young person to engage in the community locally and visit another supported living establishment to build natural friendships. As a result, the young person feels they can live independent of a formal package of support and are being supported to find long term accommodation in the area as they wish to continue building on the networks and friendships they have made.
	Llys Jasmine 10th Anniversary (Extra Care) Llys Jasmine tenants and staff celebrated the scheme's 10-year anniversary in October 2023. Llys Jasmine was the second extra care scheme opened by Flintshire County Council. To date Flintshire has developed 4 extra care schemes across the county, offering enhanced housing and support services to enable individuals to remain in the community for longer. Across the 4 schemes, there are 239 apartments, including 30 specially adapted for people living with dementia.
	Plas Yr Ywen (Extra Care) Official Opening Plas Yr Ywen's official opening took place in September 2023. We were honoured to have First Minister, Mark Drakeford, open the scheme and the event was well-attended by residents, staff, Councillors, and the local Mayor.
	Homecare Services Flintshire continues to utilise a rolling scheme of recruitment to grow our in-house homecare service to support more people to live well at home, however, recruitment across social care continues to be a challenge. To rise to this challenge, the homecare service has a designated task team looking at new and innovative ways to attract applicants to the service, and a recruitment event was held in March 2024. This work is ongoing and will support the service to grow and expand the offering to people living in our communities. The teams' fleet of all-electrical cars have doubled this year. They now have six Renault Zoe's, enabling the service to deliver home care across the county in a sustainable way and help support Flintshire's Climate Change Strategy.
	Flintshire Learning for Well-being Programme The Flintshire Learning for Well-being Programme is a partnership between Flintshire County Council and several partners, providing free courses to anyone aged over 18 living in Flintshire who are struggling with their mental well-being and/or their carers. The programme brochure details all the activities and courses available and is accessible online or as a paper copy. Leaflets are now being distributed to 50 venues, an increase from 24 venues in 2022/23, and includes a QR code which links directly to the Flintshire Learning for Well-being website. The addition of the QR code has also resulted in an increase of engagement on social media. Feedback questionnaires are completed after each session to assess the quality and impact of the courses. Discussions and social media engagement also help inform what courses may need to be added to the brochure. New sessions such as graffiti and outdoor activities including paddleboarding and archery, have been successful in engaging more young people and it is planned to include more of these activities in the brochure going forward.

	Flintshire Learning for Well-being Programme - 10th Anniversary Event In October 2023 the programme celebrated its 10th Anniversary with a networking and information sharing event at Flint Library. The event was a great success with 10 partners attending, including KIM Inspire, North-East Wales MIND, Aura, Advance Brighter Futures, Social Services Well-being Team, SAFE and FLVC. The Well-being volunteers provided taster sessions of some of the courses on offer, including floristry, sugar craft and Dungeons and Dragons, and the Photography and Watercolour courses displayed some of the amazing work they have produced. The Well-being & Recovery Social Workers were also on hand to offer advice and guidance. Over 60 people attended the event, many of whom had not heard about this service before. Due to feedback received from the event, it is planned to hold an annual event every October, to showcase the brochure and the courses and activities that are on offer.
	National Exercise Referral Scheme The National Exercise Referral Scheme (NERS) is an evidenced based health intervention funded by Welsh Government. The scheme incorporates physical activity and behavioural change, to support individuals to make healthier lifestyle choices to improve their health and well-being. Flintshire's Occupational Therapy and Single Point of Access (SPOA) Teams continue to refer individuals to scheme as appropriate. NERS continues to be promoted amongst relevant practitioners within the service to maintain awareness and ensure the benefits of the scheme continue to be accessed by eligible individuals.
	Signposting Individuals to Third Sector and Social Prescribing Formal arrangements with FLVC have increased social prescribing capacity, and a regular surgery is also held in Deeside offering advice and information.
	2024/25 Priorities • Implement the 'Effective Child Protection' practice model and embed into practice within Children's Services, over a 3-year programme. • Launch and begin the implementation of the NSPCC neglect-graded profile tool (GCP2), to support with identifying and appropriately managing risks relating to neglect. • Continue to grow our in-house homecare service to support more people to live at home, utilising a rolling scheme of recruitment. • Continue to look at new resources to support carers with the pressures due to the increase in cost of living. • Explore opportunities to support carers from ethnic minority backgrounds.

	• Support people to achieve their mental well-being outcomes by promoting personal and community well-being through open access courses delivered by the Learning Partnership.
Other information	
Inspections and reviews	**Adults' and Children's Services Performance Evaluation Inspection** From 27 November to 8 December 2023, CIW visited Flintshire Social Services to undertake a full, routine Performance Evaluation Inspection (PEI) of both Adults' and Children's Services. The purpose of the inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation. Inspectors identified good work and practice across all services and thanked everyone involved for such a warm welcome. The inspectors summarised their findings as follows: • There is a stable and experienced Senior Management Team in place across both services providing continuity of leadership. • Partner agencies, providers and stakeholders told us that leaders are visible and there are good relationships at a senior level with open communication. • Practitioners also stated leaders are accessible, approachable, and supportive, and overall, ensure practitioners have the right training and skills. A few practitioners (16%) from Children's Services who responded to the staff survey noted the leadership and culture within the local authority needed to improve, although (86%) said they were well-supported by managers. Similarly, practitioners (91%) from Adults' Services who responded to the staff survey also stated they were well supported by managers. • There are procedures in place to induct new staff members, although at times they would benefit from increased pastoral support. It is acknowledged that a new face-to-face social work collective has been set-up to offer peer support to all Social Workers across Children's and Adults' services. • Practitioners clearly know the people they support very well. In response to a survey by CIW, many people said they felt respected and listened to by practitioners. • Recruitment and retention of social care practitioners is a national challenge across Wales. The local authority continues to work hard on strategies to support continued recruitment and retention of staff. Examples include commissioning a communications agency to promote working for the local authority and increasing capacity in the Workforce Development Team. • The recent restructure across both services is acknowledged and has potential to provide more resilience, opportunities for greater support and oversight, as well as career progression. A few practitioners across both services felt the consultation about changes in structure had not adequately considered practitioner's views and had impacted their morale as it did not benefit everyone. • The local authority is well sighted on market stability in its area and the needs of its population. There are examples of the local authority implementing successful strategic plans in response to identified need and the lack of certain support services in its area. This has been achieved by working in partnership with BCUHB and other relevant partners to develop innovative services with significant capital investment. Examples include Marleyfield Care Home and Tŷ Nyth Children's Care Home.

	• The local authority has a comprehensive supervision policy. Practitioners benefit from regular supervisions, although the practice and standard of recording is inconsistent. The best supervision records focus on reflective practice and professional development. In other examples, more reflection on practice, and an improved focus on professional curiosity, outcomes and staff well-being is required. • The local authority benefits from good corporate and political support. There is a focus on ensuring statutory duties are met. Senior leaders, managers and politicians recognise significant action and resource is required to ensure the local authority's ability to deliver statutory safeguarding responsibilities. As a result, the local authority commissioned two managed care agency teams in Children's Services to provide additional capacity. This is impacting positively on the outcomes for children and families. The full report is available on CIW website
	Flintshire Fostering Service Inspection In addition to the inspection of Adults' and Children's Services, there was also a separate CIW inspection of Flintshire Fostering Services from 27 November to 01 December 2023. The inspection planned to • Focus on the extent to which the service is complying with the required regulations set out within The Regulated Fostering Services (Service Providers and Responsible Individuals) (Wales) Regulations 2019, and The Local Authority Fostering Services (Wales) Regulations 2018. • Consider the outcomes for children who use Flintshire Foster Service. The inspectors summarised their findings as follows: "The local authority fostering service is provided with sufficient care, competence, and skill, having regard to the statement of purpose. The fostering service provides foster placements for children who are looked after by the local authority and provides on-going support to foster carers. The fostering service provides the assessment of general foster carers and connected foster carers. A designated manager and a senior manager who is also the Responsible Individual oversees the fostering service. The fostering service has a staff team who are competent, committed and have the skills and knowledge to meet the requirements of the service. Staff retention is good, and staff feel supported. The local authority targets the recruitment of foster carers appropriately and is committed to increasing the number of foster carers. Children receive care from foster carers who are supported by the fostering service to promote and improve well-being outcomes. Children's health and educational needs are prioritised, they have access to a wide range of resources. Foster carers have access to the Mockingbird initiative for support, advice, and guidance. External agencies provide advice and support to children and foster carers to develop relationships and attachments." The full report is available on CIW website.
	Llys Gwenffrwd Residential Home Inspection

	Llys Gwenffrwd is a local authority run, 30 bed residential care home in Holywell. The home received an inspection from CIW on 31 August 2023. The inspector gave positive feedback about the quality-of-life resident's experience, as well as the systems and processes operated by the manager and staff. The inspectors summarised their findings as follows: "People live in a service which is homely and welcoming. There are plenty of spaces to sit and relax. There is a calm, relaxed atmosphere, and people are supported by well-trained staff who know them well. People are encouraged to contribute their views to the running of the home, and their views are taken seriously. There is a range of activities on offer, and these are personalised to people's individual preferences. Care staff are supported by a management team which is approachable and responsive to their needs." The full report is available on CIW website.
	Hafod Short-Term Care Inspection Hafod is a local authority owned short-term care service, offering respite care for people and their carers. CIW completed an inspection of the service on 15 February 2024 and a summary of the inspector's findings are below: People feel happy at Hafod and families expressed how good the service is. One gentleman packs his bags two weeks in advance and many people refer to it as going on holiday. Staff are comfortable in their role and there was lots of positive feedback about the staff team. People can bring in items from home and there is a warm, homely feeling to Hafod. There was evidence of lots of activities on offer. Personal plans, daily notes and positive behaviour support plans are all excellent, and as a result people feel safe that staff are able to meet the needs of the individuals who stay there. Medication is well managed, and the medication assessment charts were completed to a high standard. There were some lovely photos on the walls of the activities that people partake in (although they do need an update). Whilst Hafod doesn't carry out a full fire drill practice, the inspector felt there was a good understanding of fire safety, legionella and asbestos care. Recruitment had been positive, the systems allowed for safe recruiting and DBS (Disclosure & Barring Service) checks were all in place. The training matrix had been updated recently and was of a high standard, however there were a couple of certificates missing from training that had been completed. Staff felt they were well supported by their manager and really enjoyed the role. Appraisals were also up to date. The full report is available on CIW website.
Complaints and representations	Flintshire Social Services, as endorsed by the Council's Overview and Scrutiny Committee, has a robust complaints procedure in place. We welcome complaints and want to ensure individuals, carers and families are listened to, their views acted upon, and they receive a timely and open response. We work hard to resolve problems as soon as they arise, and advocacy is actively promoted. Complaints across Social Services, both Adults and Children, are relatively consistent year on year, with increases in the number of complaints one year and a fall in number the next. In terms of themes and trends, complaints received can be broadly categorised as follows:

	• **Dignity** - Where there are concerns about an individual's personal care and appearance, and the possible impacts any shortcomings may have upon that individual. • **Communication** - The way in which we keep individuals and families involved, informed, and updated about our work. • **Quality of Care** - Issues regarding an individual's care, be it residential, domiciliary, respite or foster care. • **Timeliness** - Our decision making in terms of offering and providing care and support, and the length of time taken to source packages of care. • **Disagreements** - When individuals and families challenge or appeal our decisions or involvement, or they believe there is a lack of action about issues they are raising. • **Financial Charges** - Disputes involving how we have reached decisions to charge for care and support, and the amounts applied. • **Process** - Where we haven't adhered to the process, or our paperwork may be missing important information. • **Staff** - Whereby our involvement or interactions have been misperceived or misunderstood, or questions raised about our professional conduct with people. • **Contact** - Issues regarding child and family contact arrangements as ordered by the Court. All complaints made are scrutinised and used to improve services as part of a 'lessons learnt' process. In terms of learning we have: • Revised existing information leaflets relating to charges, and reminded staff the importance of recording discussions about charges they have with individuals and families. • A project underway whereby each child with care and support needs will have their own individual case record, and therefore moving us away from the 'lead child' approach.
Referencing other sources of information	**Modernising our systems** Flintshire are keen to maximise opportunities to develop and modernise our electronic systems. **Social Care Finance System** The new social care finance system, ContrOCC, is now live for both Adults and Children. Payments to care providers, client charging and payments to clients for social care services, are now being processed through ContrOCC. **Provider Portal** The delivery of a 'Provider Portal' to external providers and foster carers is planned to commence mid-April 2024. We are aiming to sign up as many providers as possible to allow them to view payments, raise invoices, submit actuals and notify us of any changes through the portal. This functionality aims to improve accessibility for providers, but also to reduce the resource required within Social Services to handle such work. **Homecare Rostering System** After a rigorous tender process, the procurement of a Staff Rostering system has been completed. The new system will enable the teams to provide greater efficiencies using the electronic rota system. The implementation is planned to start from May 2024. **Case Management System**

	Procurement documentation to tender for a new Case Management System has been prepared and the tender is due to be issued in the coming months.
	Contextual Data and National Performance Measures **01 April 2023 to 31 March 2024** **Adult Social Services** 9,458 No. of new contacts received by statutory services during the year. 6,944 No. of those new contacts who were provided with advice or assistance. (This figure includes 973 contacts to statutory social services which resulted in advice & assistance from our social prescribing service). 6,779 No. of new assessments completed during the year. 14% Percentage of assessments that went on to have a care and support plan to meet their outcomes. On the last day of the year, we were helping 1,029 people over the age of 65 to live at home and 524 older people in care homes. 69% Percentage of people with a package of support who had their care plan reviewed within timescales. 212 No. of people who completed a package of reablement during the year. 1,913 No. of adult carers who were identified and referred to our carers service. 559 No. of people who commissioned their own services through a direct payment. 1,109 No. of adult safeguarding reports received during the year. 90% Percentage of those which progressed to Section 126 enquiries which were completed within 7 days. 312 No. of cases waiting to be allocated for a Deprivation of Liberty Safeguards assessment in Flintshire. **Children's Services** 13,451 No. of contacts received by statutory services during the year. 10,002 No. of those contacts who were provided with advice or assistance. 1,074 No. of families that received information and support through the Early Help Hub. 1,368 No. of families passed to the Information Assistance and Advice (IAA) service. 170 No of children on the Flintshire Child Protection Register on the 31st of March 2024. 89% & 97% Percentage of initial child protection conferences and review conferences carried out within timescales.

	9% Percentage of children added to the register that were re-registered within 12 months of deregistration. 10.26 months Average time that children remained on the register. 117 No. of children with a care and support plan where needs were being met through a direct payment as of the 31st of March 2024. 98 No. of children / young people who have left care during the year. 2,187 No. of new assessments completed during the year. 23% Percentage of those who went on to have a care and support plan. 54% Percentage of those who had needs which could be met by any other means. 23% Percentage of those who had no eligible needs. 236 No. of children who were looked after in Flintshire on the 31st of March 2024.
	Accessing Further Information and Key Documents **Social Care Legislation & Information Links:** The Social Services and Well-being (Wales) Act 2014 Regulation and Inspection of Social Care (Wales) Act 2016 The Well-being of Future Generations North Wales Regional Partnership Board North Wales Safeguarding Board **Flintshire County Council's Key Strategies** Flintshire County Council - Council Plan Flintshire Public Services Board - Well-Being Plan Digital Strategy Climate Change
	Glossary of Terms **Advocacy** Advocacy is taking action to help people say what they want, secure their rights, represent their interests, and obtain services they need. **Association for Fostering, Kinship and Adoption (AFKA) Cymru** AFKA Cymru promotes good practice across the breadth of permanency planning for children and young people. **Autism Spectrum Disorder (ASD)**

	ASD is the medical name for autism. **Betsi Cadwaladr University Health Board (BCUHB)** BCUHB is responsible for the delivery of health care services across the six counties of North Wales (Anglesey, Gwynedd, Conwy, Denbighshire, Flintshire and Wrexham). **Care Inspectorate Wales (CIW)** CIW are the independent regulator of social care and childcare in Wales. CIW register, inspect and take action to improve the quality and safety of services for the well-being of the people of Wales. **Children Looked After** A child is looked after by a local authority if a court has granted a Care Order to place a child in care, or a Council's Children's Services department has cared for the child for more than 24 hours. **Direct Payments** Direct payments are money from Flintshire Social Services made available to eligible people to enable them to arrange support and solutions that help meet assessed social care needs and agreed well-being outcomes. **Discharge to Recover and Assess (D2RA)** D2RA supports patients on discharge from hospital to receive intensive therapy led support to allow them to maximize their independence before returning home. **Extra Care** Housing designed with the needs of service users in mind that provides varying levels of support which is available on site and promotes independent living. **Flintshire Local Voluntary Council (FLVC)** The umbrella and support organisation for over 1200 voluntary and community groups based in Flintshire. **Guaranteed Interview Scheme** WeCare Wales' Guaranteed Interview Scheme allows individuals who have completed the Introduction to Social Care training, and previously Taster to Care, the opportunity to arrange interviews directly with registered employers. **HfT** Support people with learning disabilities to live with more independence and choice across the Flintshire area. Flintshire County Council have commissioned HfT to deliver day services and work opportunities for people with learning disabilities in the county. **Housing with Care Fund (HCF)** Capital funding from Welsh Government available to provide housing and accommodation for people with care and support needs. **Housing Support Grant (HSG)** Welsh Government funding to local authorities to spend on projects aimed at preventing homelessness and helping people to live in their own home or supported housing. **Integration and Rebalancing Capital Fund (IRCF)** Health and Social Care's IRCF is a new programme set up to directly support the Programme for Government (PfG) commitments of developing 50 integrated health and

	social care hubs and to support rebalancing the residential care market. **Menter Iaith Fflint a Wrecsam** Supporting and promoting the Welsh language in Flintshire and Wrexham. **North-East Wales Carers Information Service (NEWCIS)** NEWCIS is one of the largest providers of carer services in Wales. **North Wales Learning Disability Transformation Project (NW LD Transformation Project)** North Wales Together: Seamless Services for People with Learning Disabilities is one of four transformation projects in North Wales and is also known as the LD Transformation Project. **Regional Integration Fund (RIF)** Health and Social Care's RIF is a 5-year Welsh Government programme from April 2022 to March 2027 to help integrate health and care services. **Regional Partnership Board (RPB)** The North Wales RBP was established as part of the Social Services and Well-being (Wales) Act 2014, to improve the well-being of the population and improve how health and care services are delivered. The RPB brings together health, social services, housing, the third sector and other partners to co-ordinate the continued transformation and integration of health, social care and well-being services across the region. **SAFE** SAFE is a self-advocacy course which has now changed its name to 'Hear My Voice'. The course is run by Advance Brighter Futures and helps individuals build their self-confidence and other skills. **Special Guardianship Order (SGO)** An SGO grants overriding parental responsibility for a child over a child's parents or others who have parental responsibility.

FLINTSHIRE COUNTY COUNCIL

Social Services

2023/24 ANNUAL REPORT

& 2024/25 Priorities

CYNGOR Sir y Fflint Flintshire COUNTY COUNCIL

Design plan:
Use the dark blue as the main colour throughout, with the sub headings (and possibly the 24/25 priorities) in the burgundy colour.

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A Welsh version of this report is available.
If you would like a copy of this report in your own language or in an alternative format such as large print, braille or on tape, please contact **01352 703020.**

SECTION 1

Introduction

This Social Services Annual Report is prepared under the requirements of the Social Services and Well-being (Wales) Act 2014 and Regulation and Inspection of Social Care (Wales) Act 2016, both of which place a statutory requirement on the Council to report annually on its social services functions.

The focus of this legislation is on well-being, and our report summarises the key things that we are doing in Flintshire to support our most vulnerable residents. It describes our challenges, provides our stakeholders with a picture of how we have performed and improved over the last year, and sets out our priorities for the coming year.

Stakeholders include the people using our services, our staff, elected members, the general public, our partners, regulators and Welsh Government. Engagement with stakeholders is fundamental to what we do and informs the development of our services and future plans.

In the report, we assess our performance against each of the four areas in the Performance Improvement Framework – People, Prevention, Partnership and Integration, Wellbeing.

In each area we will evaluate:

1. What do we know about the quality and impact of what we are doing?

2. How do we know? e.g. what evidence from research, engagement and the metrics are we using to inform this assessment?

3. What are we doing well and how can we do better? What are our priorities for improvement particularly over the coming year

4. What progress did we make on the areas for improvement identified in last year's report? What difference did we make?

The work described in the report links to the Quality Standards, which set out the Welsh Government's expectations at a national level of the quality of support that local authorities must be providing.

The standards are set out below.

The Quality Standards

People

1.1 All people are equal partners who have voice, choice and control over their lives and are able to achieve what matters to them.

1.2 Effective leadership is evident at all levels with a highly skilled, well qualified and supported workforce working towards a shared vision.

Prevention

2.1 The need for care and support is minimised and the escalation of need is prevented, whilst ensuring that the best possible outcomes for people are achieved.

2.2 Resilience within our communities is promoted and people are supported to fulfil their potential by actively encouraging and supporting people who need care and support, including carers, to learn, develop and participate in society.

Partnerships and Integration

3.1 Effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people.

3.2 People are encouraged to be involved in the design and delivery of their care and support as equal partners.

Well-Being

4.1 People are protected and safeguarded from abuse and neglect, and any other types of harm.

4.2 People are supported to actively manage their well-being and make their own informed decisions so that they are able to achieve their full potential and live independently for as long as possible

There are instances where material relates to multiple quality standards, however this will be detailed in the area most appropriate.

Annual Report Priorities 2024/25

People		2024/25 Priorities	Quality Standard	Lead
1.1	All people are equal partners who have choice, voice and control over their lives and are able to achieve what matters to them	Direct payments: lead on direct payments initiatives at a National Level	1.1	Jo Taylor / Mark Cooper
1.2	Effective leadership is evident at all levels with a highly skilled well qualified and supported workforce working towards a shared vision.	Early Years & Family Support: Pilot the workforce development skills matrix to ensure staff deliver quality and effective services. To include speech, language, and communication; parenting; childcare and transformation as a minimum	1.2	Gail Bennett / Peter Wynne
		Flintshire County Council to sign the pledge and adopt Welsh Government's Corporate Parenting Charter: A Promise for Wales. To fully support the principles and promises set out in the Charter, and ensure our Children Looked After receive the highest standard of care and support.	1.1	Peter Robson
		Support the implementation of the All Wales safeguarding standards through delivery of a training programme which aligns to the competency groups within the national training framework.	1.2	Jackie Goundrey
		Continue to support the Digital Strategy by supporting the improvement of digital skills of our workforce.	1.2	Jackie Goundrey

		Maintain a high standard of available training and development opportunities for our social care workforce, including carers and the independent sector.	1.2	Jackie Goundrey
		Work with our regional partners, ensuring Flintshire are involved in the implementation of policies and training offers.	1.2	Jackie Goundrey
		Support implementation of training and information from identified areas through the SUSR process (Single Unified Safeguarding Review) and CIW Inspection.	1.2	Jackie Goundrey
		Support the We Care Campaign and the work around recruitment and retention of social care staff.	1.2	Jackie Goundrey / Gemma Wellstead
		We will remain committed to supporting the ‘mwy na geiriau’ strategic framework by ensuring we are able to offer training and resources bilingually when required.	1.2	Jackie Goundrey
		Support staff and students with a pathway into Social Work and Occupational therapy.	1.2	Jackie Goundrey
		Continue to deliver the Health & Social Care Core Level 2 and 3 Practice qualifications via our assessment centre, providing necessary qualifications for our support staff working in adult services.	1.2	Jackie Goundrey

		We will continue to work with universities and support trainee social workers through their 3 year traineeship and offer help to our occupational therapy staff undertaking their traineeship.	1.2	Jackie Goundrey
		We will continue to support both social work qualifying training and post qualifying training in Wales, including the First 3 Years Framework requirements for all post-qualifying Social Workers new into roles.	1.2	Jackie Goundrey
Prevention		**2024/25 Priorities**	**Quality Standard**	**Lead**
2.1 2.3	The need for care and support is minimised and the escalation of need is prevented whilst ensuring that the best outcomes for people are achieved. Resilience within communities is promoted and people are supported to fulfil their potential by actively supporting people who need care and/or support including carers to learn develop and participate in society.	Continue to grow our in-house fostering service to support more looked after children	2.1	Craig Macleod / Peter Robson
		Continue to develop the Special Guardianship service to reduce the need for children and young people to remain looked after.	2.1	Craig Macleod / Suzanne Johnston
		Develop childcare expansion and seamless childcare provision across programs. Achieve the childcare expansion target set by Welsh Government for the 2-year-old phase, Flying Start, Flying Start Outreach and 3–4-year-old childcare and additional support and continue the childcare capital programmes.	2.1	Gail Bennett / Peter Wynne
		Develop a national, regional and local approach to Early Years Transformation so that all our children	2.1	Gail Bennett / Peter Wynne

		ages 0-7 have the best possible start in life and are able to reach their full potential.		
		To include a regional approach to early years brain science through simple messages, metaphors, storytelling, and training - Oxford Brain Story.	2.1	Gail Bennett / Peter Wynne
		Pilot an evidence-based volunteer information provision to increase access and availability of information to support families and provide early intervention and prevention.	2.1	Gail Bennett / Peter Wynne
		Utilise the progression model as a way of promoting people's independence skills	2.1	Jo Taylor / Claire Mayers
		Continue to expand the service offering for employment opportunities for disabled people.	2.2	Jo Taylor
		Progress the newly formed partnership with Deeside Industrial Park which aims to bring employment opportunities for vulnerable people within social services.	2.2	Jo Taylor
		Continue to meet the demands of young people with learning disabilities for accommodation.	2.1	Jo Taylor
		Further development of our work to support Young Carers in their role, including but not limited to: further development of the Young Carers ID Card, focus on respite and breaks for Young Carers, engagement with education colleagues and schools, engagement with businesses and communities	2.2	Janet Bellis / Naomi Harper

		across Flintshire, support with training and education opportunities.		
		Continue to investigate and expend creative respite solutions to meet the needs of carers in bespoke and unique ways.	2.1	Janet Bellis / Naomi Harper
Partnership and integration		**2024/25 Priorities**	**Quality Standard**	**Lead / Owner**
3.1	Effective partnerships are in place to commission and fully deliver fully integrated, high quality sustainable outcomes for people	Provide additional placements for step down care within our in-house provision (Croes Atti Newydd).	3.1	Mark Holt / Marianne Evans
3.2	People are encouraged to be involved in the design and delivery of their care and support as equal partners	Support the building of a new Hub for the relocation of Tri Ffordd supported employment project to Maes Gwern in Mold.	3.1	Jo Taylor / Matt Thomas
		Continue to grow the Micro-Care market, including access to commissioned care packages.	3.2	Dawn Holt / Lee Holman
		Pilot an evidence-based volunteer parenting programme, offering parents an opportunity for peer-to-peer support and to test whether volunteer services are as effective as paid services.	3.2	Gail Bennett / Gareth Barclay
		Investigate how to identify and connect with more carers, make our services more visible and accessible and raise awareness of Carers in the local community.	3.2	Janet Bellis / Naomi Harper

		Recommissioning of Carers Services to begin in April 2025.	3.1	Janet Bellis / Naomi Harper
Well-being		**2024/25 Priorities**	**Quality Standard**	**Leads**
4.1 4.2	People are protected and safeguarded from abuse and neglect and any other types of harm People are supported to actively manage their well-being and make their own decisions so that they are able to achieve their full potential and live independently for as long as possible	Implement the "Effective Child Protection" practice model and embed into practice within Childrens' Services, over a 3-year programme.	4.1	Jane Turvey
		Launch and begin the implementation of the NSPCC neglect-graded profile tool (GCP2), to support with identifying and appropriately managing risks relating to neglect.	4.1	Jane Turvey
		Continue to grow our in-house homecare service to support more people to live at home, utilising a rolling scheme of recruitment.	4.2	Mark Holt / Vanessa Roberts
		Continue to look at new resources to support carers with the pressures due to the increase in cost of living.	4.2	Janet Bellis / Naomi Harper
		Explore opportunities to support carers from ethnic minority backgrounds.	4.2	Janet Bellis / Naomi Harper

		Support people to achieve their mental well-being outcomes by promoting personal and community well-being through open access courses delivered by the Learning Partnership	4.2	Jo Taylor / Rhian Evans

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SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday, 6th June 2024
Report Subject	Social Services Care Inspectorate Wales, Performance Evaluation Inspection November 2023 – Action Plan Update
Cabinet Member	Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

In October, CIW (Care Inspectorate Wales) announced that they would be visiting Flintshire to undertake a full, routine PEI (Performance Evaluation Inspection) of both Adult's and Children's Services.

The purpose of this inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation, on behalf of Welsh Ministers.

This was to be the first full inspection the portfolio has received for over 8 years and an opportunity to showcase the creative and innovative practice undertaken here in Flintshire.

The full report was published on Thursday 22nd February 2024 and was largely positive in their findings across Social Services (See appendix 1).

An action plan has now been produced based on the recommendations made by inspectors (see appendix 2).

RECOMMENDATION	
1	That Social and Health Care Overview and Scrutiny Committee note the outcome of the report and support the resulting Action Plan.

REPORT DETAILS

1.00	BACKGROUND AND CONTEXT
1.01	In total seven inspectors were involved in the inspection, operating on a hybrid basis with some inspectors visiting Flintshire in person and some working remotely. The in-person inspectors were based at Tŷ Dewi Sant but also travelled around to meet staff, partners, service users and their families. The remote inspectors held Microsoft Teams meetings as well as case file reading.
1.02	The inspection lasted for two weeks, starting on 27th November (file reading began on 20th November) and ended on 8th December 2023.
1.03	The purpose of this inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation, on behalf of Welsh Ministers. The inspectors sought to answer the following questions aligned under the principles of the Social Service (Wales) Well-being 2014 Act: • People - voice and control • Prevention • Well-being • Partnerships
1.04	<u>The scope of the inspection was:</u> • Evaluation of the experience of adults and children at the point of performance evaluation inspection. • Evaluation of the experience and outcomes people achieve through their contact with services. • Evidence of the local authority and partners having learnt lessons from their recent experiences and plans for service developments and improvement. • Consideration of how the local authority manages opportunity and risk in its planning and delivery of social care at individual, operational and strategic levels •
1.05	The full report was published on 22nd February and can be found in appendix 1, however, from the report they summarised the findings as follows: • *"There is a stable and experienced senior management team in place across both services providing continuity of leadership.* • *Partner agencies, providers and stakeholders told us that leaders are visible and there are good relationships at a senior level with open communication.* • *Practitioners also stated leaders are accessible, approachable, and supportive, and overall, ensure practitioners have the right training and skills. A few practitioners (16%) from children's services who*

	responded to the staff survey noted the leadership and culture within the local authority needed to improve, although (86%) said they were well-supported by managers. Similarly, practitioners (91%) from adult services who responded to the staff survey also stated they were well supported by managers. • *There are procedures in place to induct new staff members, although at times they would benefit from increased pastoral support. It is acknowledged that a new face-to-face social work collective has been set-up to offer peer support to all social workers across children's and adult services.* • *Practitioners clearly know the people they support very well. In response to a survey by CIW, many people said they felt respected and listened to by practitioners.* • *Recruitment and retention of social care practitioners is a national challenge across Wales. The local authority continues to work hard on strategies to support continued recruitment and retention of staff. Examples include commissioning a communications agency to promote working for the local authority and increasing capacity in the workforce development team.* • *The recent restructure across both services is acknowledged and has potential to provide more resilience, opportunities for greater support and managerial oversight, as well as career progression. A few practitioners across both services felt the consultation about changes in structure had not adequately considered practitioner's views and had impacted their morale as it did not benefit everyone.* • *The local authority is well sighted on market stability in its area and the needs of its population. There are examples of the local authority implementing successful strategic plans in response to identified need and the lack of certain support services in its area. This has been achieved by working in partnership with Betsi Cadwaladr University Health Board (BCUHB) and other relevant partners to develop innovative services with significant capital investment. Examples include Marleyfield Care Home and Tŷ Nyth Children's Care Home.* • *The local authority has a comprehensive supervision policy. Practitioners benefit from regular supervision although the practice and standard of recording is inconsistent. The best supervision records focus on reflective practice and professional development. In other examples, more reflection on practice, and an improved focus on professional curiosity, outcomes and staff well-being is required.*

	• *The local authority benefits from good corporate and political support. There is a focus on ensuring statutory duties are met. Senior leaders, managers and politicians recognise significant action and resource is required to ensure the local authority's ability to deliver statutory safeguarding responsibilities. As a result, the local authority commissioned two managed care agency teams in children's services to provide additional capacity. This is impacting positively on the outcomes for children and families."*
1.05	An action plan has been produced based on the recommendations from the Inspection Report which can be found in appendix 2. However, a summary of the main actions are as follows: • A Practice Directive to practitioners covering inspectors' findings of inconsistency in practice of case recording, including good practice examples to drive improvement. • Drive recruitment and retention through the Workforce Resilience Project to address local workforce shortages caused by national issues. • Advocacy training sessions delivered by newly commissioned providers to update practitioners on practice requirements and new processes. • Review of Adults Safeguarding documentation templates to ensure that outcomes are clear and evidenced effectively. • Introduction of a new case note format on Paris to ensure the effective management of enquiries and the recording of actions are clear. • Review of Children's Safeguarding documentation to ensure that that evidence is clearly set out to show completion within set timescales. • Programme of core group training to support Children's Safeguarding and ensure consistency in processes. • The already planned introduction and implementation of the "Effective Child Protection Model" will contribute significantly to support across Children's Services. • Implementation of the NSPCC Child Neglect Tool will support to identify and appropriately manage risks. • Commissioning "Leaderful Action" to deliver compassionate leadership workshops with Management Team. • Continue and build upon the work to develop relationships with our partners, ensuring communication is strengthened.

	• Work in partnership with Housing Portfolio to develop strategies to improve housing options for care leavers.
1.06	The action plan will be completed by March 2025.

2.00	RESOURCE IMPLICATIONS
2.01	**Revenue:** There are currently no implications for the approved revenue budget for this service for either the current financial year or for future financial years. Some actions identified for investigation may have implications for revenue going forward, however, these will be investigated and reported on individually should this be the case. **Capital:** There are no implications for the approved capital programme for either the current financial year or for future financial years. Some actions identified for investigation, may have implications for capital going forward, however, these will be investigated and reported on individually should this be the case. **Human Resources:** Actions with proposed implications to human resources are limited to process changes. Actions should not require additional resources or result in additional workload for current workforce.

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	Impact assessment is not required for this report. Impact Assessments will be undertaken individually (where required) for each action point.

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	Consultation with service users, staff and partners was carried out as part of the inspection as detailed above.

5.00	APPENDICES
5.01	Final Report
5.02	Action Plan

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None.

7.00	CONTACT OFFICER DETAILS
7.01	**Contact Officer:** Naomi Harper, Planning and Development Officer. **Telephone:** 01352 702544 **E-mail:** naomi.harper@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	**Care Inspectorate Wales (CIW):** is a public body that inspects, regulates and improves the quality and safety of services in Wales. **Performance Evaluation Inspection (PEI):** is a routine inspection to review the local authority's performance in exercising its social services duties and functions in line with legislation, on behalf of Welsh Ministers. **Social Service (Wales) Well-being 2014 Act:** This Act sets out the legal duties and powers of local authorities in Wales to provide care and support for adults, children and carers. It also covers the assessment, charging, financial assessment, looked after children and looked after children's accommodation.

Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Performance Evaluation Report
Flintshire County Council

November 2023

Mae’r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

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Introduction

Care Inspectorate Wales (CIW) undertook a performance evaluation inspection of children's and adult services in Flintshire County Council (FCC/the local authority) in November and December 2023. This in accordance with CIW's Framework for Performance Evaluation of Local Authority Social Services and Cafcass Cymru.

The purpose of this inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation, on behalf of Welsh Ministers.

We consider the quality standards in the Code of Practice in relation to the performance and improvement of social services in Wales and key lines of enquiry. We seek to answer the following questions aligned to the principles of the Social Services and Well-being (Wales) Act 2014 (The Act):

People - **voice and control**

- How well is the local authority ensuring all people are equal partners who have voice, choice and control over their lives and can achieve what matters to them?

- Is effective leadership evident at all levels with a highly skilled, well-qualified and supported workforce working towards a shared vision?

Prevention

- How well is the local authority ensuring the need for care and support is minimised, and the escalation of need is prevented, whilst ensuring that the best possible outcomes for people are achieved?

- How well is the local authority promoting resilience within communities and people are supported to fulfil their potential by actively encouraging and supporting people who need care and support, including carers, to learn, develop and participate in society?

Well-being

- How well is the local authority ensuring that people are protected and safeguarded from abuse, neglect and any other types of harm?

- How well are people supported to actively manage their well-being and make their own informed decisions so that they are able to achieve their full potential and live independently for as long as possible?

Partnership

- How well is the local authority able to assure itself that effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people?

- Are people encouraged to be involved in the design and delivery of their care and support as equal partners?

1. Summary - Adult and Children's Services

1.1. There is a stable and experienced senior management team in place across both services providing continuity of leadership.

1.2. Partner agencies, providers and stakeholders told us that leaders are visible and there are good relationships at a senior level with open communication.

1.3. Practitioners also stated leaders are accessible, approachable, and supportive, and overall, ensure practitioners have the right training and skills. A few practitioners (16%) from children's services who responded to the staff survey noted the leadership and culture within the local authority needed to improve, although (86%) said they were well-supported by managers. Similarly, practitioners (91%) from adult services who responded to the staff survey also stated they were well supported by managers.

1.4. There are procedures in place to induct new staff members, although at times they would benefit from increased pastoral support. It is acknowledged that a new face-to-face social work collective has been set-up to offer peer support to all social workers across children's and adult services.

1.5. Practitioners clearly know the people they support very well. In response to a survey by CIW, many people said they felt respected and listened to by practitioners.

1.6. Recruitment and retention of social care practitioners is a national challenge across Wales. The local authority continues to work hard on strategies to support continued recruitment and retention of staff. Examples include commissioning a communications agency to promote working for the local authority and increasing capacity in the workforce development team.

1.7. The recent restructure across both services is acknowledged and has potential to provide more resilience, opportunities for greater support and

managerial oversight, as well as career progression. A few practitioners across both services felt the consultation about changes in structure had not adequately considered practitioner's views and had impacted their morale as it did not benefit everyone.

1.8. The local authority is well sighted on market stability in its area and the needs of its population. There are examples of the local authority implementing successful strategic plans in response to identified need and the lack of certain support services in its area. This has been achieved by working in partnership with Betsi Cadwaladr University Health Board (BCUHB) and other relevant partners to develop innovative services with significant capital investment. Examples include Marleyfield Care Home and Tŷ Nyth Children's Care Home.

1.9. The local authority has a comprehensive supervision policy. Practitioners benefit from regular supervision although the practice and standard of recording is inconsistent. The best supervision records focus on reflective practice and professional development. In other examples, more reflection on practice, and an improved focus on professional curiosity, outcomes and staff well-being is required.

1.10. The local authority benefits from good corporate and political support. There is a focus on ensuring statutory duties are met. Senior leaders, managers and politicians recognise significant action and resource is required to ensure the local authority's ability to deliver statutory safeguarding responsibilities. As a result, the local authority commissioned two managed care agency teams in children's services to provide additional capacity. This is impacting positively on the outcomes for children and families.

Key findings and evidence

We present our key findings and evidence below in line with the four principles of the 2014 Act.

2. People – Voice & Control

Strengths - Adult Services

2.1 There are examples of person-centred and comprehensive social care assessments which evidence practitioners have taken time to get to know people. Practice in this area, however, needs to be more consistent because there were also examples of less comprehensive and person-centred assessments.

2.2 There are good examples of assessments being written in the first person, evidencing well what matters to people. **This is positive practice**.

2.3 Unpaid carers' assessments are appropriately offered. Carers of adults told us they significantly benefitted from carers' assessments and provision of support. There is a wide range of innovative practical support to promote carer well-being including counselling, grants, short-term direct payment provision, and short-term break arrangements.

2.4 The well-established direct payment service is valued by people and professionals. It is utilised creatively to support people's well-being outcomes. There is a skilled team who support people to have more control over their care and support arrangements through the flexibility of a direct payment to meet their personal outcomes and promote independence. The local authority's user-friendly direct payment portal provides helpful resources for people. This includes a list of personal assistants and relevant details about them. This assists people to choose who they wish to support them and promotes self-control and autonomy and is reflective of **positive practice**. One carer told us of the significant positive impact direct payments had made on both her and her daughter's life, enabling her daughter to live at home with support and care workers they trust.

2.5 People's Welsh language needs are considered and recorded.

2.6 The majority of staff (85%) who responded to CIW's staff survey from adult services said they had a manageable workload, and they were well supported by managers (91%). Good morale and peer support within teams was also highlighted.

Areas for improvement

2.7 Care and support plans could be further developed by setting clearer SMART outcomes and consistently taking a proactive strengths-based approach. Also, whilst people's voices are clear in some assessments, this approach should be further developed in care and support plans. **Reference should be made to what matters to the individual and personal outcomes should be recorded more consistently in the first person.**

2.8 People are sometimes supported through a duty system whilst on a waiting list for allocation to a specific worker. This can be challenging for people as there is insufficient oversight of their circumstances, lack of continuity of support, and people have to re-tell their story. **The local authority should continue with its current efforts to ensure a consistent sufficient,**

qualified, and competent workforce to lessen the need for people to be supported by different practitioners who are unknown to them.

2.9 There are examples of direct payment reviews being held. However, there was one example which had not received a review. **The local authority must review the arrangements for the making of direct payments and how they are being used in line with Code of Practice 4 (Meeting Needs) to assess whether personal outcomes continue to be met.**

2.10 **When practitioners attempt communication with individuals, the local authority should ensure a more consistent evidence base that reflects the communication methods that have been considered and attempted.**

2.11 There is insufficient evidence to demonstrate that advocacy is consistently considered and offered when it would have been appropriate. **This is an area that must be strengthened to demonstrate routine consideration of advocacy particularly in adult safeguarding.**

3. People – Voice & Control

Strengths – Children's Services

3.1 Overall children and young people's voice and choice is heard and well reflected in records. Section 47 enquiry records include direct quotes from children, focusing on what is important for them and what worries they have. A few core group minutes contained a voice of the child section which is **positive practice** although such practice would benefit from being more consistent.

3.2 Children and young people have opportunities to make their voices heard. We found **positive practice** with children having an opportunity to share their thoughts and opinions with a conference buddy prior to a conference held in line with the Wales Safeguarding Procedures (WSP).

3.3 Children and young people are overall well-supported by Personal Advisers (PAs). They benefit most from regular communication, with PAs taking a proactive approach in contacting young people and seek to obtain answers to concerns or issues young people may have. A care leaver told us "Mine [PA] is helpful and would find the answers if she didn't know. Previously I had a bad experience but now she is the first person I go to if I have a problem."

3.4 Care experienced children and young people also benefit from access to a peer support group. Children and young people told us they value this

opportunity to socialise with others who have had similar experiences. They told us; “I like meeting people who have experience of care,” “I’ve been coming to this group for eight years. It gets me out of the house.” This group has enabled some young people to advocate on behalf of care experienced children in formal meetings with the local authority, ensuring their voices are heard.

3.5 The local authority has also procured with a neighbouring local authority the ‘Mind of My Own’ app. It is an app that can be downloaded to a digital device with simple pictures and child-friendly words. It is designed for children and young people to share experiences and views on topics relevant to them. This will further enhance a digital offer for children and young people to make their views known in real time.

3.6 Children are provided with sufficient time and opportunities to share their views through direct child-centred work. In the pathway planning records for one young person, the social worker explicitly discussed and amended the plan following consultation with the young person, evidencing the young person had been heard.

3.7 There are good examples of documentation which clearly captured the voice of a child, and positive examples of records written directly to the child, providing clarity and focus as to why the WSP have been instigated which is **positive practice**. This practice could be more consistent.

3.8 Staff spoken with routinely acknowledged the support of managers. This is important in conversations about risk and safety of children as it promotes organisational accountability with practitioners feeling supported in decision-making.

3.9 Staff welcome the learning and development opportunities available to them, including support to attend training in certain areas when this was identified as a specific learning need for them.

3.10 There are systems in place to review the standard and quality of practice which include file audits. However, some practitioners were unaware of these systems. Therefore, whilst there is evidence of learning across the workforce, this could be improved with wider dissemination of relevant information.

3.11 Overall, there are good management mechanisms in place to support frontline practice. Supervision, management oversight records, and authorisations demonstrate there is line manager oversight in key practice areas. We were told by practitioners they value their managers.

3.12 The majority of staff who responded to CIW's staff survey from children's services said they had a manageable workload and (78%) also said they were well-supported by managers (86%). We also heard from practitioners who had progressed through different roles within the local authority and how well-supported they had felt. A few respondents (16%) expressed concerns about leadership and culture. They wanted their feedback and concerns to be taken into greater account, to feel more valued and respected, and they wanted the management and support of staff to be more consistent. CIW has received swift responses from the local authority in relation to how the issues raised are/will be addressed, including commissioning of leadership training, and convening of collaborative conversations to further promote and embed a positive culture across the service.

3.13 People's Welsh language needs are considered and recorded. We saw an example of the Active Offer being implemented in practice and a parent being able to converse verbally in the Welsh language in line with their wishes. **However, when Welsh is noted as a preferred language, this should also be the language in which documentation is written.** Unless it is the person's preference to have documentation in the English language and a record is made to that effect.

Areas for improvement

3.14 Disabled children and young people have to wait long periods of time for short overnight breaks in a residential provision. The local authority aims to provide alternate support in the meantime through direct payments for example. However, **the local authority must so far as is reasonably practicable, ensure it is able to provide looked after and other accommodated children with accommodation that is within the local authority's area and that meets the children's needs. This in line with Code of Practice 6 (Looked After and Accommodated Children).**

3.15 As a result of the fragility in the social care workforce, children and young people experience changes in social workers. Children are supported through a duty system rather than an allocated worker at times. Changes in social workers makes it challenging for children to develop trusting relationships. We heard from one young person how they are aware their social worker will soon change. Parents also have to repeat their stories and views to social workers. As a result of changes in practitioners, support can be delayed, with oversight of children and young people's situation also impacted. **The local authority must continue with its current efforts to ensure a consistent, sufficient, qualified, and competent workforce to meet its statutory duties, and should consider an exit strategy for ending the reliance on the commissioned managed agency team.**

4. Well-being

Strengths – Adult Services

4.1 There are examples of practitioners appropriately establishing whether a person is an adult at risk, as defined in the WSP, prior to implementing the procedures. From the social care records we reviewed, we found strategy meetings are generally well attended, and Section 126(1) (s.126) enquiries are largely undertaken and completed within statutory timescales.

4.2 The local authority offers safeguarding training to providers as well as in-house practitioners which is **positive practice**. This promotes consistency of practice and ensures that the roles and responsibilities in relation to safeguarding are widely understood.

4.3 There is a strategic commitment to develop community services. The investment in local hubs and other capital investment supports this agenda. For example, Hwb Cyfle is a purpose-built service for disabled people offering different activities in community-based environments to promote people's well-being. The provision would benefit from increased opportunities to support people to maximise their independence in relation to daily living skills.

4.4 There are good examples of the development of innovative teams/posts such as the progression and well-being team. These teams are designed to support people and to prevent escalation of needs.

4.5 We saw examples of people being discharged from hospital with support in a timely manner. In 2022, the council reviewed and then made changes to how older people are supported in their discharge planning from hospital through the formation of a Discharge to Assess and Recover Team (DART). The DART service has clear roles and responsibilities supported by effective governance.

Areas for improvement

4.6 In relation to adult safeguarding, we saw variation in social care records. Greater clarity is required in relation to the views of the adult at risk, decision making, determinations, and whether subsequent actions have addressed the original concern. The outcomes of the enquiries must be shared with the reporter. **The local authority must ensure that adult safeguarding practice consistently meets with the requirements of the WSP.**

4.7 There are examples of people's social care assessments and safeguarding reports indicating they lack mental capacity to make decisions about their care. The quality and decision making of these records is variable. **The local authority must ensure practice consistently aligns with the requirements and principles of the Mental Capacity Act 2005 and the relevant Code of Practice.**

4.8 In common with many other local authorities across Wales, people's rights are impacted by the waiting lists for Deprivation of Liberty (DoLS) assessments. **The local authority must ensure that arrangements for the provision for DoLS assessments are fit for purpose and responsive**.

4.9 The current recording system does not support practitioners to capture people's strengths and outcomes in a meaningful way. **The local authority should take this into consideration, with the imminent procurement of an updated recording system.**

5. Well-being

Strengths – Children's Services

5.1 Children and families' needs in Flintshire are complex and demand is increasing, as is the picture across Wales. Two agency teams have been commissioned to assist the core staff team to meet demand and the local authority's statutory duties. There is corporate and political support for this, evidencing continued support to prioritise services for vulnerable children, young people and their families. It is noted that there is corporate support to maintain the agency team until the time is appropriate to end their contract.

5.2 Overall, safeguarding responses, such as convening initial strategy discussions, are timely.

5.3 There is evidence of exceptional strengths-based practice utilised by individual practitioners. This is **positive practice**. **For this approach to become embedded, the local authority should consider a model of practice that highlights what needs to change in families, with greater focus on how family and wider community networks can be facilitated to keep children safe**. A model would promote a shared understanding across agencies of safeguarding practice and management of risk. It would also provide practitioners with consistent tools and templates in relation to recording and maintaining focus on risk. It is acknowledged that the local authority is on a journey to fully implement a model of practice. This has already commenced with an initial focus on neglect, with the local authority having purchased a neglect-graded profile tool through the National Society

for the Prevention of Cruelty to Children (NSPCC) to support practice. This is a **positive** response by the local authority to a high number of children affected by neglect on the child protection register (CPR).

5.4 In the specific early phase of a Section 47 enquiry, the standard of practice is good and there is evidence of appropriate managerial oversight to inform and support practice.

5.5 We saw an example of **positive practice** where a heath professional chaired a core group meeting, evidencing in line with the WSP, that chairing and minuting of these meetings is a joint responsibility between children's services and relevant partners.[1]

Areas for improvement

5.6 There is indication the threshold for significant harm is not always applied consistently when considering removing children from the CPR. We heard this may be as a result of a misplaced conception that maintaining a child's name on the CPR is a means of ensuring continued support services for a child and their family. **The local authority should consider sharing guidance more widely with relevant partners and stakeholders to ensure consistent and shared understanding of thresholds and information sharing protocols.**

5.7 Risks are appropriately considered, with timely progression to the right service for children and families. There are, however, delays for some families subject to child protection procedures as enquiries are not always completed promptly. It is not always clear what the determination is post completion of a Section 47 enquiry. **Managers must ensure that, following the timely conclusion of a child protection enquiry, next steps are explicitly recorded with clarity and rationale in relation to the determinations under Section 3 Part 1 of the Wales Safeguarding Procedures.**

5.8 As Section 47 enquiries are not always completed in the required timescales, this impacts on timely decision making as to whether a child's name should be included on the CPR. **The local authority should ensure that when it has been determined that a child is experiencing or is at risk of experiencing harm, abuse or neglect, a child protection conference is convened within 15 working days of the strategy discussion/meeting, or the last strategy discussion/meeting (if more than one has occurred), which initiated the Section 47 enquiry.**

[1] Full report - Rapid Review of Child Protection Arrangements FINAL FOR PUBLICATION (careinspectorate.wales)

5.9 Some care and support protection plans viewed are service led, with a focus on compliance instead of outcomes. Care and support protection plans are not routinely updated after core group meetings. It is acknowledged that recent training commissioned by the local authority has focused on clarifying roles and responsibilities for social workers. **An outline care and support protection plan devised at first conference should be developed into a more detailed plan at the first core group meeting as is highlighted in the WSP. Subsequent core groups should specifically review progress of outcomes for the child's safety. Leaders should ensure practitioners have clear systems and standards for developing plans which are child-centred and outcome-focused.**

5.10 We saw examples of disclosures by police about an individual's criminal background, with a potential risk for a child, having been appropriately considered to promote children's safety. However, sharing of the information was not always completed in a timely manner with pressures of work cited in one example as the reason for the delay. **When the local authority is aware of such information, and it has been agreed they can share information with relevant individuals to promote a child's safety, this must be done in a timely manner.**

6. Prevention

Strengths – Adult Services

6.1 Capacity has been created to enable applications for grant funding to be made. This is coordinated through a designated officer, and evidences good corporate support for promoting the preventative agenda.

6.2 There are good examples of the local authority working hard to reshape and redesign its service in lines with its vision of people receiving reablement and community-based rehabilitation support. For instance, the expansion of Marleyfield Care Home which enables people to recover following a hospital stay and return to live independently. The local authority invested from its own capital programme supported by Welsh Government grants. The development and implementation of the operational model has been co-produced with BCUHB. This supports the local authority's plan to increase its own residential care capacity, whilst also supporting BCUHB with additional Step-Up Step-Down bed capacity.

6.3 Further demonstration of FCC's commitment to support people to return home and to live independently is its plan to expand step-down provision through the development of Croes Atti Newydd, building on their learning from Marleyfield Care Home. Croes Atti Newydd is being developed as part of the

local authority's own capital development supported by Health and Social Care Regional Integration Fund and will offer other services in addition to a step-down facility.

6.4 The local authority is proactive in promoting different types of services to support people to reach their outcomes, and to enable people to live in their own homes for longer. An example of this **positive practice** is the local authority's promotion and support for micro carers. Similar to the direct payment portal, the local authority has an easy to navigate micro carer portal. This enables people to be able to find and manage their own support. The micro carers are on a specific framework, evidencing their suitability to support people and enabling the local authority to directly commission a service from them.

6.5 As is common across Wales, people in some areas of the county are having to wait for domiciliary care packages to support them with their care and support needs. This means people may be inadequately supported during this time, and this may place additional responsibilities on unpaid carers. The Council's Plan for 2023-2028 highlights innovative ideas to try and expand options to provide support. Examples include continuing to grow their in-house homecare service, utilising a rolling scheme of recruitment and promoting and supporting the expansion of micro carers. There is also the availability of pooled cars, and **positive practice** of the local authority commissioning paid drivers to transport care workers who are non-drivers as means of ensuring people are supported.

6.6 Single Point of Access (SPoA) in Flintshire provides a swift and responsive service seven days a week which is **positive practice**. We observed the high number of calls coming in and practitioners respectfully answering the calls. This has been corroborated by a person who spoke with us "*They were swift and I'm always confident I can speak to people in SPOA."* They were equally complimentary of other parts of adult services, evidencing adult services as a whole is focused on preventing escalation of need.

Areas for improvement

6.7 Waiting lists for social care assessments and reviews are high and can impact negatively on people. Oversight of waiting lists for social care assessments is inconsistent across teams. Whilst we received verbal reassurance about oversight of waiting lists in teams, there was limited records to evidence this. **The local authority must ensure that waiting lists are appropriately and consistently monitored and key information is recorded to evidence appropriate prioritisation of cases.**

6.8 Care and support plans are not always reviewed in a timely manner. **The local authority must keep care and support plans under review to understand whether the provision of care and support is meeting the identified needs of the individual, and to consider if their needs have changed and if a re-assessment is required.**

7. Prevention

Strengths – Children's Services

7.1 The local authority is focused on ensuring the need for care and support is minimised and escalation of need is prevented. There is a well-established Early Help Hub, which includes a range of partners and third sector agencies. The focus is on delivering more timely and appropriate support to families with greater levels of need to those who are supported by universal service solely. In addition, the local authority has created an Information, Advice and Assistance service (IAA) at the beginning of this year. This was a response to the pressure of increase in contacts with the focus on continuing to support families at an early stage.

7.2 There is a focus on promoting the well-being of young carers. Children were observed to benefit from the availability of support in a young carers support group. They clearly enjoyed the activities on offer and the company of both practitioners and peers alike.

7.3 There is a clear strategic focus on supporting placements in a care home and foster placements, as well as supporting children to remain in the care and/or return to the care of their families through Multi Systemic Therapy (MST). The teams provide support 24 hours a day 7 days a week. One of the teams, North East Wales MST- FIT, supports children who live in Tŷ Nyth as well as children who live at home with their parents. Tŷ Nyth is the first Integrated Treatment Model Home in Wales and is subject of tripartite funding between the local authority, BCUHB and a neighbouring local authority. Children and young people's outcomes have improved following support from MST.

7.4 The local authority has developed a toolkit in response to the Public Law Outline (PLO) refresh implemented in January 2023 by the judiciary across England and Wales. It contains a range of new documentation which will further promote continuity of strengths-based practice. It also provides clarity to parents about what the concerns are about their children, and what changes are required to reduce the concerns. Children who are ten years of age or over will also be allocated a PLO buddy, similar to a conference buddy, to ensure their voice is obtained as part of these pre-court proceedings specifically. This is **positive practice** as it further promotes the voice of

children and their families. Practice can be improved by ensuring that records sufficiently detail when and where a decision was made to commence PLO proceedings, and to reflect that decision making in this respect is timely.

Areas for improvement

7.5 Children who are neurodiverse or who are awaiting diagnosis of a potential neurodiverse condition, and their parents, do not always receive prompt and adequate support and communication. Delays in support impact on their well-being. It is acknowledged that the local authority is well-sighted on this and has recently developed their service to include having a dedicated role to respond and support parent/carers sooner, whilst their children are awaiting a neurodiverse assessment/diagnosis. **The local authority should continue to have oversight and monitor the effectiveness of this development and the impact of this for children and families.**

8. Partnership

Strengths – Adult Services

8.1 The local authority works well with providers across Flintshire at an operational level to support service delivery and efficiency. Providers told us they have open lines of communication with staff in the local authority and feel comfortable to use them as a 'sounding board' for new ideas and projects.

8.2 The local authority holds frequent meetings with colleagues in BCUHB to discuss quality of care and provision in care homes in the area. We observed how this forum promotes effective information sharing and informed decision-making in relation to subsequent actions that agencies would take.

8.3 The Progress for Providers scheme is highly regarded by practitioners and providers alike. The scheme enables care home and domiciliary support providers to work towards different awards of bronze, silver and gold in relation to how well they deliver personalised support to people. The approach is **positive** as it promotes outcome-based practice rather than traditional task-based support and the range of tools and guidance to support providers is valuable. The local authority regrades providers according to their performance.

8.4 The local authority supports young people with a learning disability up to the age of 25 years to obtain work placements with the aim of paid employment. A more recent development is that this will now be offered to individuals over the age of 25 years with a learning disability. This is a positive joint approach between the local authority, HFT (an established charity supporting people

with learning disabilities), housing association Clwyd Alyn, and Coleg Cambria.

Areas for improvement

8.5 Most partnerships are working well at an operational level; however, information is not always shared effectively due to different methods and systems for recording information. This means information regarding people's care and support needs is not easily available across partners, to include some practitioners employed by the local authority. **The local authority should consider, whilst they are procuring a new recording system, how they can further promote information sharing.** All relevant practitioners in different teams within FCC such as locality, substance misuse, and community mental health teams should be able to access all records of the person they support. This would support information sharing and promote a greater oversight and understanding of a person's circumstances.

8.6 The local authority must strengthen its systems around carers assessments to ensure the rights and voice of all carers are fully promoted. Carers assessments are not adequately recorded or communicated with the local authority. We saw examples where practitioners are not aware of whether a carer's assessment had been undertaken, and if so, the outcome of the assessment. **The local authority must have greater oversight of these assessments to be confident that it fully meets its responsibilities in line with the requirements of Part 3 and Part 4 of the Code of Practice (assessing and meeting the needs of individuals).**

9. Partnership

Strengths – Children's Services

9.1 Systems and relationships are mainly in place to facilitate effective partnership working. Both internal to children's services and in working with partners, there is a shared ethos to safeguard and promote the well-being of children.

9.2 Overall, at a strategic level, work with partners is based on a shared understanding and cooperation. Partners described leaders as being transparent and open to challenge. There is regular communication across sector leads, although persistent change in managers in partner agencies was cited as a challenge in working consistently. Some third sector partners considered their work with children's services could be improved in relation to inclusivity and their participation in planning of services.

9.3 Information sharing between agencies through Section 47 enquiries, initial child protection conferences and core groups is evident. In further meetings such as review conferences, there can be diminishing contribution from partner agencies. Partner agencies expressed they wished to be more involved in initial strategy discissions/meetings. There is work already underway to establish a MASH (Multi Agency Safeguarding Hub) within the local authority which will further promote involvement and multi-agency working.

9.4 Placement sufficiency is a challenge across Wales and the local authority has in the past placed children in services which are operating without registration. However, the local authority has utilised significant capital investment to meet its duty of providing sufficient accommodation within its own area to children looked after. An example of this **positive practice** is the recent investment in in house residential care including the recent build of Y Dderwen and the development of 2 small group homes. Children benefit from living close to their family, friends, and community.

9.5 Care leavers benefit from continued support once they leave care. This in the form of the 'When I am Ready' scheme, whereby young people remain with foster carers whilst they transition into adulthood. Young people told us how they valued this provision. However, they said they feel hurt that the documentation refers to them as tenants rather than family members of the foster carers they choose to continue to live with. They very much regard themselves as part of the foster carers' family and vice versa. **The local authority should consider how they can influence a change in terminology.**

Areas for improvement

9.6 **Children's services must communicate information about duty to report outcomes in a timely manner to the person who made the initial report.** There are inconsistencies in current practice in relation to this.

9.7 **Children's services must ensure that appropriate agencies are invited to strategy discussions/meetings in line with the WSP, to include but not limited to, a practitioner making the report and practitioners from education and community-based health services if relevant.**

9.8 The views and experiences of parent/carers of disabled children indicated that the availability of support to them could be strengthened and more flexible. They told us the support offered was not always suitable for their and their child's needs. **The local authority must ensure the parent/carer is involved as a full partner in assessing to what extent they are able to**

meet their personal outcomes, or with the support of others who are willing to provide that support; or with the assistance of services in the community to which they have access.

9.9 We saw examples of children who were leaving care having to present as homeless to receive housing support. Practitioners also shared that accommodation for young people is an ongoing challenge and an area for improvement. There are clear longer-term options to support young people in general with housing support, in line with the well-being objectives in the Council Plan for 2023-2028. An example is a strategic plan, informed by a multi-agency approach, to create a young person's homeless hub which will offer accommodation as well as support services. **However, the local authority must continue to prioritise its programme of ensuring appropriate housing options for young care leavers and relevant 16–17-year-olds**. This in both the longer and shorter term, and where possible, avoiding the need for care leavers to present as homeless.

10. Next Steps

We expect Flintshire County Council to take appropriate action to improve the areas identified for improvement. We will monitor progress through our ongoing performance review activity with the local authority. We welcome the local authority sharing the positive practice identified with other local authorities, to share learning and help drive continuous improvement in statutory services throughout Wales.

11. Methodology

Fieldwork

- Most inspection evidence was gathered by reviewing the experiences of 45 people through review and tracking of their social care record. We reviewed 34 social care records and tracked 10.
- Tracking a person's social care record includes having conversations with the person in receipt of social care services, their family or carers, key worker, the key worker's manager, and were appropriate other professionals involved
- We engaged, through interviews and/or focus groups, with 40 people receiving services and/or their carer.
- We engaged, through interviews and/or focus groups with 133 local authority employees and elected members (this included but was not limited to social workers, team managers, operational managers, senior managers and director of social services).
- We interviewed a range of partner organisations.

- We reviewed a sample of staff supervision records.
- We observed a resource panel and an interagency meeting in adult services.
- We reviewed supporting documentation sent to CIW for the purpose of the inspection.
- We administered surveys to local authority social services staff, partner organisations and people.

Our Privacy Notice can be found at https://careinspectorate.wales/how-we-use-your-information.

12. Welsh Language

CIW is committed to providing an active offer of the Welsh language during our activity with local authorities.

The active offer was not required on this occasion. This is because the local authority informed us that people taking part did not wish to contribute to this performance evaluation inspection in Welsh.

13. Acknowledgements

CIW would like to thank staff, partners and people who gave their time and contributed to this inspection.

14. Glossary

Must -Improvement is deemed necessary in order for the local authority to meet a duty outlined in legislation, regulation or code of practice. The local authority is not currently meeting its statutory duty/duties and must take action.

Should - Improvement will enhance service provision and/or outcomes for people and/or their carer. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the local authority may fail to meet its legal duty/duties in future.

Positive practice - Identified areas of strength within the local authority. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.

Prevention and Early Intervention - A principle of the Act which aims to ensure that there is access to support to prevent situations from getting worse, and to enhance the maintenance of individual and collective well-being. This principle

centres on increasing preventative services within communities to minimise the escalation of critical need.

Voice and Control - A principle of the Act which aims to put the individual and their needs at the centre of their care and support, and giving them a voice in, and control over, the outcomes that can help them achieve well-being and the things that matter most to them.

Well-being - A principle of the Act which aims for people to have well-being in every part of their lives. Well-being is more than being healthy. It is about being safe and happy, having choice and getting the right support, being part of a strong community, having friends and relationships that are good for you, and having hobbies, work or learning. It is about supporting people to achieve their own well-being and measuring the success of care and support.

Co-Production - A principle of the Act which aims for people to be more involved in the design and provision of their care and support. It means organisations and professionals working with them and their family, friends and carers so their care and support is the best it can be.

Multi-Agency working - A principle of the Act which aims to strengthen joint working between care and support organisations to make sure the right types of support and services are available in local communities to meet people's needs. The summation of the Act states that there is a requirement for co-operation and partnership by public authorities.

SMART - SMART is a best practice framework for setting goals. A SMART goal should be specific, measurable, achievable, realistic and time bound.

What matters - 'What Matters' conversations are a way for professionals to understand people's situation, their current well-being, and what can be done to support them. It is an equal conversation and is important to help ensure the voice of the individual or carer is heard and 'what matters' to them

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Adult's Services					
Finding		Action	Owner	Timescale	Evidence of success
People - Voice and Control - Strengths					
2.1	There are examples of person-centred and comprehensive social care assessments which evidence practitioners have taken time to get to know people. Practice in this area, however, needs to be more consistent because there were also examples of less comprehensive and person-centred assessments.	Practice Directive to be created to remind practitioners on the requirements of a comprehensive and person-centred assessment. The Practice Directive will include a refresher on the basics as well as including some good practice examples.	Jan Bellis Chris Phillips Jo Taylor	By 30th June 2024	
People - Voice and Control - Areas for improvement					
	Care and support plans could be further developed by setting clearer SMART outcomes and consistently taking a proactive strengths-based approach. Also, whilst people's voices are clear in some assessments, this approach should be further developed in care and support plans. **Reference should be made to what matters to the individual and personal outcomes should be recorded more consistently in the first person.**	Practice Directive to be created to support practitioners with the creation of outcomes utilising SMART objectives with a strengths-based approach. The Practice Directive will include some good practice examples.	Jan Bellis Chris Phillips Jo Taylor	By 30th June 2024	
2.8	People are sometimes supported through a duty system whilst on a waiting list for allocation to a specific worker. This can be challenging for people as there is insufficient oversight of their circumstances, lack of continuity of support, and people have to re-tell their story. **The local authority should continue with its current efforts to ensure a consistent sufficient, qualified, and competent workforce to lessen the need for people to be supported by different practitioners who are unknown to them.**	Progressing through the Workforce Resilience Project workstreams, looking at a) improving our success in recruitment and b) what can be done to retain our current workforce. Consideration is to be given to introducing a consistent duty social worker role to each Locality Team pending outcome of current trial.	Jan Bellis Chris Phillips Jo Taylor	Ongoing with monthly meetings Review by 30th June 2024	

2.9	There are examples of direct payment reviews being held. However, there was one example which had not received a review. **The local authority must review the arrangements for the making of direct payments and how they are being used in line with Code of Practice 4 (Meeting Needs) to assess whether personal outcomes continue to be met.**	This is an isolated incident due to circumstances of a particular case. There is good practice and processes in place to ensure the robust review of Direct Payments. A recent review of the Direct Payment financial processes has been undertaken and actions from this will be implemented: • Move to proportionate monitoring using new risk assessment matrix. • Reduce surplus funds allowance from 8 to 6 weeks. • Move all Direct Payments to more effective management solutions i.e., remove all PADP and paper monitoring. • Improve completion of correct service information data.	Jan Bellis Chris Phillips Jo Taylor	By 30th September 2024	
2.10	**When practitioners attempt communication with individuals, the local authority should ensure a more consistent evidence base that reflects the communication methods that have been considered and attempted.**	Practice Directive to be created to remind practitioners on the requirements of recording and evidencing communication attempts. The Practice Directive will include a refresher on the basics as well as including some good practice examples. This will be reviewed and monitored on an ongoing basis through casefile audit process.	Jan Bellis Chris Phillips Jo Taylor	By 30th June 2024	
2.11	There is insufficient evidence to demonstrate that advocacy is consistently considered and offered when it would have been appropriate. **This is an area that must be strengthened to demonstrate routine consideration of advocacy particularly in adult safeguarding.**	Practice Directive to be created to remind practitioners of the advocacy offer available, information on the new advocacy contracts as well as detail on the differences and appropriateness for family advocacy vs. formal advocacy will be included in this directive. The Practice Directive will emphasise the need to record the advocacy offer in documentation along with the considerations given during the investigation of whether advocacy is required.	Jan Bellis Chris Phillips Jo Taylor Jane Davies Jayne Belton Michele Hingston	By 30th June 2024	

		Audit checklist to be amended and expanded to ask if advocacy was used and if not, why not.	Jacque Slee	Complete	Audit checklist now includes this question.
		Advocacy providers will be invited to deliver information sessions for teams, giving information about the new offer and answer questions.	Workforce Development Team	By 30th June 2024	
		Create a report in Paris to investigate how many are completing advocacy information to monitor the progress with commentary.	Jacque Slee	Complete	Data is available and able to be provided from Paris as and when required. This will be monitored at the Quarterly Performance Review meeting.

Adult's Services					
Finding		Action	Owner	Timescale	Evidence of success
Well-being - Strengths					
4.3	There is a strategic commitment to develop community services. The investment in local hubs and other capital investment supports this agenda. For example, Hwb Cyfle is a purpose-built service for disabled people offering different activities in community-based environments to promote people's well-being. The provision would benefit from increased opportunities to support people to maximise their independence in relation to daily living skills.	We readily accept this recommendation through the tender process for our day services. All day services contacts are due for renewal in the next 12 months and will be reviewed in line with these recommendations. A different approach will be adopted to stipulate a requirement in the new contracts for people to learn new skills, increasing independence and improving daily living skills, progressing to fulfil their potential as well as take part in fun activities. Increasing opportunities for people to participate in Supported Employment and other forms of Community Support will be featured in Service Specifications for the future. This will also be expanded to include short term care.	Jan Bellis Jo Taylor	By February 2025	
Well-being - Areas for Improvement					

4.6	In relation to adult safeguarding, we saw variation in social care records. Greater clarity is required in relation to the views of the adult at risk, decision making, determinations, and whether subsequent actions have addressed the original concern. The outcomes of the enquiries must be shared with the reporter. **The local authority must ensure that adult safeguarding practice consistently meets with the requirements of the WSP.**	Review of closure forms to ensure that subsequent actions have met the original concerns.	Michele Hingston Jayne Belton	By 30th June 2024 and ongoing	
		Discussions with the team to ensure recording and reporting back is consistent.		By 30th June 2024	
		Review of the Paris form to ensure that there is a relevant space to capture this.		By 30th June 2024	
4.7	There are examples of people's social care assessments and safeguarding reports indicating they lack mental capacity to make decisions about their care. The quality and decision making of these records is variable. **The local authority must ensure practice consistently aligns with the requirements and principles of the Mental Capacity Act 2005 and the relevant Code of Practice.**	Practice Directive to be created to remind practitioners of the expectation of the quality of their recording their evidence.	Janet Bellis Chris Phillips Jo Taylor Jane Davies Jayne Belton Michele Hingston	By 30th June 2024	
		One particular case highlighted an issue. Lessons Learnt will be undertaken and will drive further actions.		By 30th June 2024	
4.8	In common with many other local authorities across Wales, people's rights are impacted by the waiting lists for Deprivation of Liberty (DoLS) assessments. **The local authority must ensure that arrangements for the provision for DoLS assessments are fit for purpose and responsive.**	Robust process is in place and is continually under review. Urgent cases are prioritised, the process is reactive.	Jane Davies Jayne Belton Michele Hingston	Complete / Ongoing	Process will remain continually under review.
4.9	The current recording system does not support practitioners to capture people's strengths and outcomes in a meaningful way. **The local authority should take this into consideration, with the imminent procurement of an updated recording system.**	Circulation of good practice cases identified at monthly casefile audit sessions will continue to support compliance with the recording policy.	Jacque Slee	Complete	Will be circulated to Team Managers to review with Teams on an ongoing basis.
		Procurement for the new system will be approximately 3 years, this will be taken into consideration during this process.	Jane Davies Jacque Slee Claire Clements	In progress / Long term	

Adult's Services				
Finding	Action	Owner	Timescale	Evidence of success
Prevention - Areas for Improvement				
6.7	Waiting lists for social care assessments and reviews are high and can impact negatively on people. Oversight of	Paris will be updated to include a new enquiry priority option and a new casenote	Jan Bellis Chris Phillips	Complete	Paris has been updated to include the new casenote type/reason.

	waiting lists for social care assessments is inconsistent across teams. Whilst we received verbal reassurance about oversight of waiting lists in teams, there was limited records to evidence this. **The local authority must ensure that waiting lists are appropriately and consistently monitored and key information is recorded to evidence appropriate prioritisation of cases.**	type/reason. This will ensure that action taken on Enquiries Manager before allocation can be clearly identified and evidenced.	Jacque Slee Claire Clements		Communication has been sent to Team Managers.
6.8	Care and support plans are not always reviewed in a timely manner. **The local authority must keep care and support plans under review to understand whether the provision of care and support is meeting the identified needs of the individual, and to consider if their needs have changed and if a re-assessment is required.**	Implemented changes to process for hospital discharges. Cases now sent directly to review meaning that they are reviewed sooner than going to locality. Further consideration of changes to processes is being undertaken within current resource restrictions.	Janet Bellis Chris Phillips Hannah Thomas	By 30th June 2024	

Adult's Services				
Finding	Action	Owner	Timescale	Evidence of success
Partnership - Areas for Improvement				
8.5 Most partnerships are working well at an operational level; however, information is not always shared effectively due to different methods and systems for recording information. This means information regarding people's care and support needs is not easily available across partners, to include some practitioners employed by the local authority. **The local authority should consider, whilst they are procuring a new recording system, how they can further promote information sharing.** All relevant practitioners in different teams within FCC such as locality, substance misuse, and community mental health teams should be able to access all records of the person they support. This would support information sharing and promote a greater oversight and understanding of a person's circumstances.	Procurement of system to replace Paris is underway and will be complete in approximately 3 years.	Jacque Slee Claire Clements	In progress / Long term	
	Consider potential for access to Paris for FCC MH Social Workers.		By 30th June 2024	
	Discussion with Jo Taylor to investigate wider access to Paris for other team members – Jacque Slee to arrange a meeting.		By 30th June 2024	Meeting has been booked. Update following meeting

8.6	The local authority must strengthen its systems around carers assessments to ensure the rights and voice of all carers are fully promoted. Carers assessments are not adequately recorded or communicated with the local authority. We saw examples where practitioners are not aware of whether a carer's assessment had been undertaken, and if so, the outcome of the assessment. **The local authority must have greater oversight of these assessments to be confident that it fully meets its responsibilities in line with the requirements of Part 3 and Part 4 of the Code of Practice (assessing and meeting the needs of individuals).**	Explore options for specific Social Services individuals to have access to the NEWCIS Charity Log system to be able to access Carers Needs Assessments as and when required.	Jane Davies Janet Bellis Naomi Harper NEWCIS	By 30th June 2024	

Children's Services				
Finding	Action	Owner	Timescale	Evidence of success
People - Voice and Control - Strengths				
3.1 Overall children and young people's voice and choice is heard and well reflected in records. Section 47 enquiry records include direct quotes from children, focusing on what is important for them and what worries they have. A few core group minutes contained a voice of the child section which is **positive practice** although such practice would benefit from being more consistent.	TAF group established to conduct file audits on core group documentation and consider if they are they presenting the daily lived experience of the child and is that then fed through into the recording.	Jayne Belton	By 30th June 2024	
	Dedicated core group training will be rolled out again. 12-month programme is set to start in May.	Safeguarding and Workforce Development Teams	Beginning on 14th May 2024	
	Specified minute taker assigned for core groups. Individual will be included in training and will be key in ensuring the voice of the child is captured.	Jayne Belton Shireen Rogers	By 30th June 2024	
3.7 There are good examples of documentation which clearly captured the voice of a child, and positive examples of records written directly to the child, providing clarity and focus as to why the WSP have been instigated which is **positive practice**. This practice could be more consistent.	Practice Directive to be created. Establish TAF group to write this as a training support. Information: Consideration of tailoring the information to the age of the child and the literacy age of the parent.	Jayne Belton Brigid Gribbin	By 30th June 2024	

		This will be reinforced through roll out if the programme the "*Effective Child Protection*" model.			
3.10	There are systems in place to review the standard and quality of practice which include file audits. However, some practitioners were unaware of these systems. Therefore, whilst there is evidence of learning across the workforce, this could be improved with wider dissemination of relevant information.	Review communication lines for information dissemination.	Peter Robson Jane Turvey Suzanne Johnston	By 30th June 2024	
		Ensure that feedback from File Audits is presented at Team managers Meetings.	Peter Robson Jane Turvey Suzanne Johnston	By 30th June 2024	
		Include information on File Audit process in the Induction Pack to inform newly qualified, newly appointed team members.	Naomi Harper	End March 2024	Complete, documents published.
		Develop peer audit model.	Peter Robson Jane Turvey Suzanne Johnston	By 30th June 2024	
3.12	A few respondents (16%) expressed concerns about leadership and culture. They wanted their feedback and concerns to be taken into greater account, to feel more valued and respected, and they wanted the management and support of staff to be more consistent.	Commissioned "*Leaderful Action*" to deliver compassionate leadership workshops with Management Team.	Craig Macleod	By 30th September 2024	
		Progressing through the Workforce Resilience Project workstreams, in particular the creation of a staff Retention Plan	Craig Macleod Peter Robson Suzanne Johnston Jane Turvey	Ongoing with monthly meetings	
3.13	People's Welsh language needs are considered and recorded. We saw an example of the Active Offer being implemented in practice and a parent being able to converse verbally in the Welsh language in line with their wishes. **However, when Welsh is noted as a preferred language, this should also be the language in which documentation is written.** Unless it is the person's preference to have documentation in the English language and a record is made to that effect.	Practice Directive to be created to set the expectation and ensure understanding of processes behind this. Practice Directive will be issued to both Adults' and Children's Services.	Jane Davies	By 30th June 2024	

People - Voice and Control - Areas for Improvement					
3.14	Disabled children and young people have to wait long periods of time for short overnight breaks in a residential provision. The local authority aims to provide alternate support in the meantime through direct payments for example. However, **the local authority must so far as is reasonably practicable, ensure it is able to provide looked after and other accommodated children with accommodation that is within the local authority's area and that meets the children's needs. This in line with Code of Practice 6 (Looked After and Accommodated Children).**	Update and issue a revised Commissioning Placement Strategy that identifies placement needs, and local authority placement/commissioning intentions within the context of Welsh Government's policy and legislative framework for removing profit from Childrens social care.	Craig Macleod Jo Taylor	By 30th September 2024	
3.15	As a result of the fragility in the social care workforce, children and young people experience changes in social workers. Children are supported through a duty system rather than an allocated worker at times. Changes in social workers makes it challenging for children to develop trusting relationships. We heard from one young person how they are aware their social worker will soon change. Parents also have to repeat their stories and views to social workers. As a result of changes in practitioners, support can be delayed, with oversight of children and young people's situation also impacted. **The local authority must continue with its current efforts to ensure a consistent, sufficient, qualified, and competent workforce to meet its statutory duties, and should consider an exit strategy for ending the reliance on the commissioned managed agency team.**	Progressing through the Workforce Resilience Project workstreams, looking at a) improving our success in recruitment and b) what can be done to retain our current workforce.	Craig Macleod Peter Robson Suzanne Johnston Jane Turvey	Ongoing with monthly meetings	
		Where possible encourage a crossover period where cases are handed between teams.	Peter Robson Suzanne Johnston Jane Turvey	Review by 30th June 2024	
		Trial one-page profiles in Children's Services to ensure that the need for repetition is prevented.	Peter Robson Suzanne Johnston Jane Turvey	By 30th December 2024	

Children's Services					
Finding		Action	Owner	Timescale	Evidence of success
Well-being - Strengths					
5.3	There is evidence of exceptional strengths-based practice utilised by individual practitioners. This is **positive practice**. **For this approach to become embedded, the local authority should consider a model of practice that highlights what needs to change in families, with greater focus on how family and wider community networks can be facilitated to keep children safe**. A model would promote a shared understanding across agencies of safeguarding practice and management of risk. It would also provide practitioners with consistent tools and templates in relation to recording and maintaining focus on risk. It is acknowledged that the local authority is on a journey to fully implement a model of practice. This has already commenced with an initial focus on neglect, with the local authority having purchased a neglect-graded profile tool through the National Society for the Prevention of Cruelty to Children (NSPCC) to support practice. This is a **positive** response by the local authority to a high number of children affected by neglect on the child protection register (CPR).	*Implement the first phase of "Effective Child Protection"* Model.. This is a 3 year programme to develop our approach to working with families whose children are on the child protection register.	Craig Macleod Peter Robson Suzanne Johnston Jane Turvey	Phase 1: 31st March 2025	
		The Graded Care profile 2 is an evidence based tool to assess and manage neglect. The tool has been purchased from NSPCC . The tool will support practitioners to identify and appropriately manage risks relating to neglect. A project will be developed in April 2024 to implement the tool with a training programme delivered through to the end of 2025.	Craig Macleod Peter Robson Suzanne Johnston Jane Turvey	End of 2025	
Well-being - Areas for Improvement					
5.6	There is indication the threshold for significant harm is not always applied consistently when considering removing children from the CPR. We heard this may be as a result of a misplaced conception that maintaining a child's name on the CPR is a means of ensuring continued support services for a child and their family. **The local authority should consider sharing guidance more widely with relevant partners and stakeholders to ensure consistent and shared understanding of thresholds and information sharing protocols.**	Re-issue laminated sheets with categories and definitions. Training on definitions and registration/deregistration included as part of the conference and core group training programme over 12 months from May.	Safeguarding Team	By 30th June 2024	
		Practice Directive will be created to improve information sharing through FCC and other agencies. Directive will ensure social workers work proactively with IAA and EHH to identify support available if deregistered and a clear step down plan is in place prior to discussions around deregistration.	Jane Turvey Suzanne Johnston	By 30th June 2024	

		Through Supervision meetings, managers will ensure that the thorough consideration has been given and documented to support conversations and decision-making processes during de-registration meetings.	Peter Robson Suzanne Johnston Jane Turvey	By 30th June 2024	
5.7	Risks are appropriately considered, with timely progression to the right service for children and families. There are, however, delays for some families subject to child protection procedures as enquiries are not always completed promptly. It is not always clear what the determination is post completion of a Section 47 enquiry. **Managers must ensure that, following the timely conclusion of a child protection enquiry, next steps are explicitly recorded with clarity and rationale in relation to the determinations under Section 3 Part 1 of the Wales Safeguarding Procedures.**	It is recognised that our processes and systems on our PARIS IT system need to be re-engineered. This will involve the S47 and Part 3 assessment documentation on Paris to be separated to bring greater clarity of process and timelines.	Brigid Gribbin Claire Clements Jacque Slee	By 30th June 2024	
		To fully improve our workflow and performance management systems we will need to replace the current PARIS system. We will need to work with Procurement to ensure that we are commission a new system that supports practice and provides effective and timely performance management.	Jane Davies Jacque Slee Claire Clements	In progress / Long term	
5.8	As Section 47 enquiries are not always completed in the required timescales, this impacts on timely decision making as to whether a child's name should be included on the CPR. **The local authority should ensure that when it has been determined that a child is experiencing or is at risk of experiencing harm, abuse or neglect, a child protection conference is convened within 15 working days of the strategy discussion/meeting, or the last strategy discussion/meeting (if more than one has occurred), which initiated the Section 47 enquiry.**	Agree a process for the MASH, including the recording of decisions, that is compliant with the WSP. This action is also linked to action 5.7.	Brigid Gribbin	By 30th June 2024	
5.9	Some care and support protection plans viewed are service led, with a focus on compliance instead of outcomes. Care and support protection plans are not routinely updated after core group meetings. It is acknowledged that recent training commissioned by the local authority has focused on clarifying roles and responsibilities for social workers. **An outline care and support protection plan devised at first**	Establish a TAF group to investigate and share learnings.	Jane Turvey Suzanne Johnston Peter Robson	By 30th September 2024	
		Seek advice and expertise on the implementation of the *"Effective Child Protection".*	Craig Macleod Jane Turvey Suzanne Johnston Peter Robson	By 31st March 2025	

	conference should be developed into a more detailed plan at the first core group meeting as is highlighted in the WSP. Subsequent core groups should specifically review progress of outcomes for the child's safety. Leaders should ensure practitioners have clear systems and standards for developing plans which are child-centred and outcome-focused.	Include in the conference and core group training programme over 12 months from May.	Safeguarding and Workforce Development Teams	Beginning on 14th May 2024	
		Review and amend format of the Protection Plan documentation. Consider how this documentation displays how the daily life of the child will be changed through the identified plan.	FIT Manager Brigid Gribbin Safeguarding Managers	By 30th June 2024	
5.10	We saw examples of disclosures by police about an individual's criminal background, with a potential risk for a child, having been appropriately considered to promote children's safety. However, sharing of the information was not always completed in a timely manner with pressures of work cited in one example as the reason for the delay. **When the local authority is aware of such information, and it has been agreed they can share information with relevant individuals to promote a child's safety, this must be done in a timely manner.**	Establish specific timescales to define our expectation of "timely".	Brigid Gribbin	By 30th June 2024	
		In recognition of delays from other agencies, agree timescales and process for escalation.	Brigid Gribbin	By 30th June 2024	

Children's Services				
Finding	Action	Owner	Timescale	Evidence of success
Prevention - Strengths				
7.4	The local authority has developed a toolkit in response to the Public Law Outline (PLO) refresh implemented in January 2023 by the judiciary across England and Wales. It contains a range of new documentation which will further promote continuity of strengths-based practice. It also provides clarity to parents about what the concerns are about their children, and what changes are required to reduce the concerns. Children who are ten years of age or over will also	Establish TAF group to audit quality of documentation in recording LAM minutes.	Peter Robson Jane Turvey Suzanne Johnston	By 3st October 2024	
		Standard letter sent out following PLO, consider whether this is captured on records.	Jane Turvey	By 30th June 2024	

	be allocated a PLO buddy, similar to a conference buddy, to ensure their voice is obtained as part of these pre-court proceedings specifically. This is **positive practice** as it further promotes the voice of children and their families. Practice can be improved by ensuring that records sufficiently detail when and where a decision was made to commence PLO proceedings, and to reflect that decision making in this respect is timely.	Ensure that this is consistently applied and referrals are made where children cross the age threshold for a Conference Buddy.	Jane Turvey	Review by 30th June 2024	
Prevention - Areas for Improvement					
7.5	Children who are neurodiverse or who are awaiting diagnosis of a potential neurodiverse condition, and their parents, do not always receive prompt and adequate support and communication. Delays in support impact on their well-being. It is acknowledged that the local authority is well-sighted on this and has recently developed their service to include having a dedicated role to respond and support parent/carers sooner, whilst their children are awaiting a neurodiverse assessment/diagnosis. **The local authority should continue to have oversight and monitor the effectiveness of this development and the impact of this for children and families.**	Successful application for NDIP funding has resulted in a new social worker in post from January 2024 to specifically support 16–25-year-olds who are Neurodiverse, in all aspects of their lives. This post has been highly successful and has received very positive feedback. Monitor the effectiveness of this post and the impact that it is having on young people and their families. Use the evidence of this to submit applications for funding for further posts to support other age groups.	Jo Taylor	Review in June 2024	

Children's Services				
Finding	Action	Owner	Timescale	Evidence of success
Partnership - Strengths				
9.2	Overall, at a strategic level, work with partners is based on a shared understanding and cooperation. Partners described leaders as being transparent and open to challenge. There is regular communication across sector leads, although persistent change in managers in partner agencies was cited as a challenge in working consistently. Some third sector partners considered their work with children's services could be improved in relation to inclusivity and their participation in planning of services.	Continue and build upon the work to develop relationships with our partners, ensuring communication is strengthened so that they are aware of our thresholds. This will be delivered through monthly meetings with health and education. We will also develop 6 monthly meetings with 3rd sector to ensure they have the opportunity to participate in service planning.	Jane Turvey	Review 30th October 2024	

9.3	Information sharing between agencies through Section 47 enquiries, initial child protection conferences and core groups is evident. In further meetings such as review conferences, there can be diminishing contribution from partner agencies. Partner agencies expressed they wished to be more involved in initial strategy discissions/meetings. There is work already underway to establish a MASH (Multi Agency Safeguarding Hub) within the local authority which will further promote involvement and multi-agency working.	Include in the conference and core group training programme over 12 months from May.	Safeguarding and Workforce Development Teams	Beginning on 14th May 2024	
9.5	Care leavers benefit from continued support once they leave care. This in the form of the 'When I am Ready' scheme, whereby young people remain with foster carers whilst they transition into adulthood. Young people told us how they valued this provision. However, they said they feel hurt that the documentation refers to them as tenants rather than family members of the foster carers they choose to continue to live with. They very much regard themselves as part of the foster carers' family and vice versa. **The local authority should consider how they can influence a change in terminology.**	Use of language is restricted due to the technical terms in the SSWBA (14) that refers to "When I am Ready" placements. Ensure that Personal Advisor Team provide our Leaving Care Young People with explanations and rationale behind it. This will form part a wider piece of work on 'Mind Your language' which identifies that terminology and language that our children and young people prefer/ want us to avoid.	Peter Robson	By 30th September 2024	
Partnership - Areas for Improvement					
	Children's services must communicate information about duty to report outcomes in a timely manner to the person who made the initial report. There are inconsistencies in current practice in relation to this.	Continue to work with Business Support Teams on the process and improve access points for partner agencies.	Jayne Belton	Review 30th June 2024	
		Safeguarding Business Support team to be included in child protection / core group training programme	Jayne Belton	Beginning on 14th May 2024	
		Improve professional's knowledge on where referrals should be sent to i.e., correct mailbox. Create Practice Directive to establish proportionate approach, to include:when it is appropriate to give feedback, who gives feedback and how it is given as well as what evidence is required once feedback is provided.	Jayne Belton Brigid Gribbin	By 30th June 2024	

9.7	**Children's services must ensure that appropriate agencies are invited to strategy discussions /meetings in line with the WSP, to include but not limited to, a practitioner making the report and practitioners from education and community-based health services if relevant.**	Continue to work to include agencies in discussions where possible and appropriate in line with WSP. The establishment of the Safeguarding Hub will support this development.	Brigid Gribbin	Review by 30th June 2024	
9.8	The views and experiences of parent/carers of disabled children indicated that the availability of support to them could be strengthened and more flexible. They told us the support offered was not always suitable for their and their child's needs. **The local authority must ensure the parent/carer is involved as a full partner in assessing to what extent they are able to meet their personal outcomes, or with the support of others who are willing to provide that support; or with the assistance of services in the community to which they have access.**	Support to upskill 3rd Sector carer's support agencies to ensure that they have sufficient experience with carers of children with disabilities.	Jo Taylor	By 30th June 2024	
		Ensure that all workers are aware of the flexibility of the direct payment offer and the ability of the direct payments to offer a unique and bespoke package of support.	Jo Taylor	By 30th December 2024	

9.9	We saw examples of children who were leaving care having to present as homeless to receive housing support. Practitioners also shared that accommodation for young people is an ongoing challenge and an area for improvement. There are clear longer-term options to support young people in general with housing support, in line with the well-being objectives in the Council Plan for 2023-2028. An example is a strategic plan, informed by a multi-agency approach, to create a young person's homeless hub which will offer accommodation as well as support services. **However, the local authority must continue to prioritise its programme of ensuring appropriate housing options for young care leavers and relevant 16–17-year-olds**. This in both the longer and shorter term, and where possible, avoiding the need for care leavers to present as homeless.	Explore the development of multi-agency hub(s) to support young people with all elements of independence, to include housing.	Paul Calland (Housing Portfolio)		
		Continue to work to develop preventative strategies for "rare, brief and non-repeat" homelessness.	Martin Cooil (Housing Portfolio)	By 30th September 2024	
		Development of new Parenting Strategy – building in resilience for 16/17-year-olds with preventative measures.	Peter Robson	By 30th September 2024	
		Investigate broadening Local Solutions Supported Lodgings services.	Lisa Pearson (Housing Portfolio)	By 30th September 2024	
		Investigate the potential to explore shared tenancies in local authority / housing association properties.	Jen Griffiths (Housing Portfolio)	By 30th September 2024	
		Make connection with Flintshire's Ending Homelessness board and actions that are progressing through this workstream.	Jane Davies Homelessness Board	Review by 30th June 2024	
		Ensure that Housing Support and Homeless Service are alerted promptly as part of the 16th pathway plan to allow forward planning. This needs to be consistent across all individuals including those with low level/no needs). Run report from Paris to check for birthdays coming up in 12 months and ensure plans are in place.	Peter Robson Personal Advisor Team	By 30th June 2024	

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